

REQUEST FOR QUOTATION

The Philippine Statistics Authority (PSA) through its Bids and Awards Committee (BAC) will undertake alternative mode of procurement, **(shopping, small value, etc.)** for <u>Re-Post: Toner.</u>

Name of Project	Supply and Delivery of Toner.
Solicitation	PR No. NCS-18-07-066
Location	Metro Manila
Brief Description	Procurement of Good
Quantity	See attached Bid Form
Approved Budget for the	
Contract (ABC)	₱ 21,750.00
Contract Duration	

Please quote your **lowest price** on the item/s listed below and submit personally your **SEALED QUOTATION not later than 5:00 pm on September 7, 2018** at the **General Services Division**, 11th FIr., Cyberpod One Enton Centris, Diliman, Quezon City.

BAC Chairperson

Terms and Conditions:

- 1. Only the suppliers registered at the Philippine Government Electronic Procurement System (PhilGEPS) shall be allowed to submit the quotation.
- 2. All entries must be typewritten/printed legibly in the Bid Form. Failure to use this form will result to disqualification of your bid.
- 3. Late submission of quotation shall not be accepted.
- 4. Bids exceeding the ABC shall be disqualified.
- 5. The Lowest bidder shall be informed immediately and shall be asked to submit additional requirements within three days after the opening of bids or during post qualification.
- 6. Award of contract shall be made to the lowest quotation, and complies with the specifications and other terms and conditions as stated in the RFQ.
- 7. Terms of Payment shall be made through check payable to the supplier.
- 8. The PSA reserves the right to reject any or all bid proposals, or declares the bidding a failure, or not to award the contract, and makes no assurance that a contract shall be entered into as a result of this invitation.

BID FORM

Item/s and specification/s (minimum)	Unit	Qty.	Unit Price	Total Amount (VAT inclusive)	with Te	cations
Toner Ink					()	()
HP Laserjet Pro 200MFP M277N HPB3Q10A	pcs	-5-	₱	₱	()	()
HP Laserjet Pro MFP M277SDN	pcs	-5-	₱	₱	()	()
X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-				Total amount in words:		() () () () () () ()

Other	Rec	ıııir⊖r	nents:
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After having carefully read and accepted yo	ur Terms and	Conditions.	I/We quote	you on	the item
at prices noted above.					

Printed Name of authoriz	zed representative/Sigr	nature	
Position:			
Name of Company			
Address:		Email Address:	
Fax No	Tel No.:	Cellphone No	
Date:			