



### REQUEST FOR QUOTATION

The Philippine Statistics Authority (PSA) through its Bids and Awards Committee (BAC) will undertake Shopping as Alternative Mode of Procurement for official use of PSO Sorsogon with the following details:

<b>Name of Project</b>	<b>Procurement of Office and Other Supplies for 2024 Census of Population and Community-Based Monitoring System</b>		
<b>Solicitation</b>	2024-08-047-SR		
<b>Location</b>	PSO Sorsogon		
<b>Brief Description</b>	(See Bid Form, <i>Page 2</i> )		
<b>Quantity</b>	(See Bid Form, <i>Page 2</i> )		
<b>Approved Budget for the Contract (ABC)</b>	Php 121,464.60	Lot 1: 98,392.30	Lot 2: 18,542.30
		Lot 3: 4,530.00	
<b>Contract Duration</b>	15 days after receipt of Purchase Order		

Please quote your **Lowest Price** on the item/s listed below and submit your **SEALED QUOTATION** not later than **12:00 pm on 25 September 2024** at the **PSA Sorsogon, 2/F Clemente Building, Garcia St., Sulucan, Sorsogon City**

**CECILLE A. BRIONES**  
 RBAC 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. Supplier must be an authorized re-seller of original equipment manufacturer.
3. All entries must be typewritten/printed legibly in the Bid Form. Failure to use this form will result to disqualification of your bid.
4. Late submission of quotation shall not be accepted.
5. Bids exceeding the ABC shall be disqualified.
6. The lowest bidder shall be informed immediately and shall be asked to submit the following requirements within three days after the opening of bids or during post qualification:
  1. Mayor's/Business Permit Permit
  2. PhilGEPS Registration Number
7. 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.
8. Terms of Payment shall be made through check payable to the supplier.
9. 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)	Compliance with Technical Specifications (please check)	
					YES	NO
<b>Procurement of Office and Other Supplies for 2024 Census of Population and Community-Based Monitoring System</b>						
<b>Lot 1</b>						
Bond Paper, A4, multipurpose, 70gsm	reams	60	P _____	P _____	( )	( )
Bond Paper, legal, multipurpose, 80gsm	reams	250	P _____	P _____	( )	( )
Clip, backfold, metal clamping 50mm	box	50	P _____	P _____	( )	( )
Clip, backfold, metal clamping 25mm	box	50	P _____	P _____	( )	( )
Staple Wire, standard (26/6)	box	10	P _____	P _____	( )	( )
DTR Form 48	reams	100	P _____	P _____	( )	( )
Paper Clip, 33mm	box	50	P _____	P _____	( )	( )
Paper Fastener, plastic, 70mm between prongs	box	50	P _____	P _____	( )	( )
Spiral Wire, Wrap tube, black, 10m	piece	15	P _____	P _____	( )	( )
Sub Total:				P _____		
<b>Lot 2</b>						
Ink Refill, BTD60bk	bottle	10	P _____	P _____	( )	( )
Ink Refill, BT5000Y	bottle	10	P _____	P _____	( )	( )
Ink Refill, BT5000C	bottle	10	P _____	P _____	( )	( )
Ink Refill, BT5000M	bottle	10	P _____	P _____	( )	( )
Ink Refill, #T6641, black	bottle	10	P _____	P _____	( )	( )
Sub Total:				P _____		
<b>Lot 3</b>						
Facial Tissue, Paper 2ply sheets, 150 pulls	box	50	P _____	P _____	( )	( )
Sub Total:				P _____		
				<b>Total</b>	P _____	
					Total amount in words:	
					_____	
					_____	

xxxxx  
For official use of PSA Sorsogon

**Other requirements:**

After having carefully read and accepted your Terms and Conditions. I/We quote you on the item at prices noted above.

Printed Name and Signature of authorized representative: \_\_\_\_\_

Position: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Fax No. \_\_\_\_\_ Tel No.: \_\_\_\_\_ Cellphone No.: \_\_\_\_\_

LBP Account Number of Establishment: \_\_\_\_\_

Date: \_\_\_\_\_

Do you have Mayor's/Business Permit: \_\_\_ Yes \_\_\_ No

Philgeps Registration: \_\_\_ Yes \_\_\_ No

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Printed Name and Signature of Canvasser: \_\_\_\_\_