

Republic of the Philippines

Philippine Statistics Authority

Region V - Bicol

REQUEST FOR QUOTATION

The Philippine Statistics Authority (PSA) through its Bids and Awards Committee (BAC) will undertake <u>Small Value Procurement (SVP)</u> as Alternative Mode of Procurement for official use of PSO Sorsogon with the following details:

Name of Project	Printing Services for the 2024 Functional Literacy, Education and Mass Media Survey (FLEMMS) Third Level Training and Enumeration Manual and Questionnaires
Solicitation	2024-09-059-SR
Location	PSO Sorsogon
Brief Description	(See Bid Form, Page 2)
Quantity	(See Bid Form, Page 2)
Approved Budget for the Contract (ABC)	Php 137,150.00
Contract Duration	within 7 days upon receipt of PO

Please quote your Lowest Price on the item/s listed below and submit your SEALED QUOTATION not later than 12:00 pm on 24
September 2024 at the PSA Sorsogon, 2/F Clemente Building, Garcia St., Sulucan, Sorsogon City



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.

PHILIPPINE STATISTICS AUTHORITY							Pag	ge 2
REQUEST FOR QUOTATION								
	BID FOR	RM						
	T	T		T	Com	nplia	nce	with
				Total Amount				
Item/s and Specification/s	Unit	Qty	Unit Price	(VAT inclusive)	Specification			
(Minimum)				(**************************************	1 .	(please check)		
					YE	-		10
Printing Services for the 2024 Functional Literacy, E	ducation ar	d Mass Medi	a Survey (FLEN	IMS) Third Level Tr				
Enumeratio	n Manual a	nd Questionn	aires	T				
Manual								
Note: 150 pages x 40 copies	pages	6,000.00	P	P	()	()
Questionnaires (3rd level training)								
Note: 40 copies per form (Form 1: 8pg + Form 2B: 2pg	pages	800.00	P	P	1,	١	,)
+ Form 3: 10 pg = 20pg x 40 = 800 pages b&w)	pages	000.00	'	'	1	,	'	,
Note: 40 copies per form (Form 2A: 2pg + Form 2C: 3pg	pages	480.00	P	P	1	١	1	١
+ Form 2D: 7 pg = 12pg x 40 = 480 pages colored)	Pages	100.00			,	,	'	,
Form 1: 8 page (b&w)								
Form 2A: 2 page (colored)								
Form 2B: 2 page (b&w)								
Form 2C: 3 pages (colored)								
Form 2D: 7 pages (colored)								
Form 3: 10 pages (b&w)								
Questionnaires (for enumeration)								
Form 1: 8 pages (b&w) x 160 copies	pages	1,280.00	P	P	1)	1	1
Form 2A : 2 pages (colored) x 1,760 copies	pages	3,520.00	P	P	1	1	1	1
Form 2B : 2 pages (b&w) x 1,760 copies	pages	3,520.00	P	P	1)	1)
Form 2C : 3 pages (colored) x 5,280 copies	pages	15,840.00	P	P	1)	()
From 2D: 7 pages (colored) x 330 copies	pages	2,310.00	P	P	1	í	1)
From 3 : 10 pages (b&w) x 160 copies	pages	1,600.00	P	P	()	()
xxxxx			Total					
For official use of PSA Sorsogon			Total	P Total amount in				
Tot official asc of Fox solisogon				words:				
				Words.				
Other requirements:								
After having carefully read and accepted your T	erms and Co	nditions. I/We	e quote you on	the item at prices	noted	d abo	ove.	
Printed Name and Signature of authorized representative:_								
Position:					_			
Name of Company:								
ress: Email Address:							_	
					-			
LBP Account Number of Establishment: Date:								
Do you have Mayor's/Business Permit:Yes No	****		Philgeps Regis	tration: Yes	N	lo		

Printed Name and Signature of Canvasser:								