

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 Small Value Procurement as Alternative Modes of Procurement for official use of PSA Catanduanes with the following details:

| Name of Project | Procurement of Printing Service of Forms for use in the 2024 FLEMMS Training on 23-27 September 2024 and Enumeration on 30 September 2024 to 22 October 2024 | | | |
|--|--|--|--|--|
| Solicitation | 2024-09-094-CT | | | |
| Location | PSA Catanduanes Provincial Statistical Offices | | | |
| Brief Description | (See Bid Form, Page 2) | | | |
| Quantity | (See Bid Form, Page 2) | | | |
| Approved Budget for the Contract (ABC) | Php 125,250.00 | | | |
| Contract Duration | 10 days upon receipt of Purchase Order | | | |

Please quote your Lowest Price on the item/s listed below and submit your SEALED QUOTATION not later than 1:00 pm on 24 September 2024 at PSA Catanduanes PSO, BL Jastrid Bldg., Cavinitan, Virac, Catanduanes.

*<i>d***ECILLE A. BRIONES** RBAC Chairman

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
- 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.

- 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 REQUEST FOR QUOTATION

BID FORM

| Item/s and Specification/s (Minimum) | Unit | Qty | Unit Price | Total Amount (VAT inclusive) | Specifi (please | nical cations check) |
|--|-------------|-------------|----------------------|--|--------------------|----------------------------|
| | | | | | YES | NO |
| Procurement of Printing Service of Forms for use in th | e 2024 FLE | MMS Trainin | ng on 23-27 Sep | tember 2024 and | Enumera | tion on |
| 30 Septem | ber 2024 to | 22 Octobe | 1 ²⁰ 2024 | I | T | 1 |
| raining (extra form includes a set for the discussant) | | | | | | - |
| orm 1(8 pages, black and white) | set | 41 | | | () | (|
| orm 2A (2 pages, colored) | set | 41 | | | | 1(|
| form 2B (2 pages, black and white) | set | 41 | | | | 11. |
| orm 2C (3 pages, colored) | set | 41 | | | $\frac{1}{1}$ | ŧ ì – |
| Form 2D (7 pages, colored) | set | 41 | | ····· | | 1 |
| Form 3 (10 pages, black and white) | set | 41 | | ······································ | | <u>ا</u> ۱ |
| Enumeration | | | | | | |
| Form 1 (8 pages, black and white) | set | 160 | | | () | 1. |
| Form 2A (2 pages, colored) | set | 1,760 | | | () | .] (|
| Form 2B (2 pages, black and white) | set | 1,760 | | | () | I (|
| Form 2C(3 pages, colored) | set | 5,280 | | | () |] (|
| Form 2D (7 pages, colored) | set | 330 | · | | (ī) |](|
| Form 3 (10 pages, black and white) | set | 160 | | | () | (|
| XXXXXX | | | Tota | | 1 | |
| For official use of PSA-Catanduanes | | | | Total amount in words: | | |
| | | | | | | 1 |
| | | | | | | |
| | | | | | | |

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 Signat | ure of authorized representative: | <u> </u> |
|-------------------------|---------------------------------------|---------------------------------------|
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| | | Email Address: |
| | | Cellphone No.: |
| LBP Account Number of | Establishment: | · · · · · · · · · · · · · · · · · · · |
| Date: | <u>_</u> | |
| Do you have Mayor' | s/Business Permit ?YesNo * | Philgeps Registration?YesNo |
| Printed Nan | ne and Signature of Canvasser: | |

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