



## **REQUEST FOR QUOTATION**

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

| Name of Project                        | Procurement of Polo Shirts for the conduct of July 2025 LFS and 2025 FIES Visit 1 |  |  |  |  |  |
|--|---|--|--|--|--|--|
| Solicitation                           | 2025-05-039-MT  |  |  |  |  |  |
| Location                               | PSA Masbate Provincial Statistical Office   |  |  |  |  |  |
| Brief Description                      | (See Bid Form, Page 2)  |  |  |  |  |  |
| Quantity                               | (See Bid Form, Page 2)  |  |  |  |  |  |
| Approved Budget for the Contract (ABC) | Php 52,200.00   |  |  |  |  |  |
| Contract Duration                      | Ten (10) days upon receipt of PO  |  |  |  |  |  |

Please quote your **Lowest Price** on the item/s listed below and submit your **SEALED QUOTATION** not later than **10:00am on June 10**, **2025** at **PSA Masbate**, **Ten-7 Building**, **Masbate**.

CECILLE 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.
- 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

Do you have Mayor's/Business Permit ? \_\_\_\_Yes \_\_\_\_No

BID FORM

|   | DID LOUIS      | 1   |               |                                 | _  |           | 701 =    |
|---|----------------|-----|---------------|---------------------------------|--|-----------|----------|
| Item/s and Specification/s (Minimum)  | Unit           | Qty | Unit Price    | Total Amount<br>(VAT inclusive) | Compliance with<br>Technical<br>Specifications<br>(please check) |           |          |
|   |                |     |               |                                 | YES  | 4         | NO       |
| Procurement of Polo Shirts for the conduct of July 2025 LFS and 2025 FIES Visit 1 |                |     |               |                                 |  |           |          |
|   |                | 116 |               |                                 | 1  | 1         | ( )      |
| Polo Shirt with PSA and Project Logo  | рс             | 116 | +             |                                 | 1  | 1         |          |
| xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx  |                |     |               |                                 |  | $\exists$ |          |
| Wothing Follows   |                |     |               |                                 |  | _         |          |
|   |                |     |               |                                 |  | $\dashv$  |          |
|   |                |     |               |                                 | +  | $\dashv$  |          |
|   | -              |     |               |                                 | _  |           |          |
|   |                |     |               |                                 |  |           |          |
|   |                |     |               |                                 |  |           |          |
|   |                |     |               |                                 | _  |           |          |
|   |                |     |               | -                               | +  |           |          |
|   |                |     |               |                                 | +  |           |          |
|   |                | _   |               |                                 |  |           |          |
|   |                |     |               |                                 |  |           |          |
|   |                |     |               |                                 |  |           |          |
|   |                |     |               |                                 |  |           |          |
|   |                |     |               |                                 |  |           | -        |
| ,   |                |     | Total         |                                 | -  |           | +        |
|   |                |     | — Tatal ar    | Total amount in words:          |  |           | <b>-</b> |
| For official use of PSA-Masbate   |                |     | - Total al    | Total alliquit ill words.       |  |           |          |
|   |                | 1   |               |                                 |  |           |          |
| Printed Name and Signature of authorized representative:                          |                |     |               |                                 |  |           |          |
| Position:   |                |     |               |                                 |  |           |          |
| Name of Company:  |                | -   |               |                                 |  |           |          |
| Address:  |                |     |               |                                 |  |           |          |
| Fax NoTel No.:  | Cellphone No.: |     |               |                                 |  |           |          |
| LBP Account Number of Establishment:  |                |     |               |                                 |  |           |          |
| Date:   |                |     |               |                                 |  |           |          |
| Davies have Mayor's /Business Permit? Yes No                                      |                |     | Philgeps Regi | stration?Yes                    | _No  |           |          |

Printed Name and Signature of Canvasser:

Reference No. 25SSSS08-64

Subject: Personnel Involved in the July 2025 Labor Force Survey and 2025 Family Income and Expenditure Survey

Visit 1 Series of Training Date: 05 May 2025

## Attachment 4. Design of Polo Shirts

1. Textile: Cotton

2. Print: Full sublimation printing



