



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 **Shopping** as Alternative Mode of Procurement for official use of PSA RSSO V with the following details:

Name of Project	Replenishment of Supplies for the 2024 Consumer Expectations Survey
Solicitation	2025-01-006-SOCD
Location	PSA RSSO V
Brief Description	(See Bid Form, Page 2)
Quantity	(See Bid Form, Page 2)
Approved Budget for the Contract (ABC)	Php 77,035.00
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 **8:00AM, February 03, 2025** at the **2/F PSA Building, Regional Government Center, Rawis, Legazpi 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. 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 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
 3. Certificate as authorized reseller of original equipment manufacturer (for inks and toners)
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.
9. Submission of electronic bid should be password protected otherwise, it will be rejected.

BID FORM

Item/s and Specification/s (Minimum)	Unit	Qty	Unit Price	Total Amount (VAT inclusive)	Compliance with Technical Specifications (please check)	
					YES	NO
Replenishment of Supplies for the 2024 Consumer Expectations Survey						
Lot 1			ABC:	18,850.00		
Bondpaper, A4 80gsm	ream	50	P_____	P_____	()	()
Sticker Paper, A4, white, 10s	pack	12	P_____	P_____	()	()
Photopaper, A4, glossy, 10s	pack	5	P_____	P_____	()	()
Tape, packaging, 1", 30m	roll	10	P_____	P_____	()	()
Tape, transparent, 1", 30m	roll	10	P_____	P_____	()	()
Sign pen, refill, 0.7	pcs	10	P_____	P_____	()	()
Ballpen, black	pcs	30	P_____	P_____	()	()
Steno Notebook	pc	50	P_____	P_____	()	()
Paper Cutter, Wooden base, heavy-duty	pc	1	P_____	P_____	()	()
Binder clip, 32mm, 12s	box	5	P_____	P_____	()	()
Binder clip, 25mm, 12s	box	5	P_____	P_____	()	()
Correction tape, 10m	pc	5	P_____	P_____	()	()
			Sub-Total	P_____		
Lot 2			ABC:	11,000.00		
Long arm stapler, up to 12" distance, 25sheets stapling capacity	pc	1	P_____	P_____	()	()
Laminating Machine, metal structure, anti-jam reverse function, with temp control, light indicator	Unit	1	P_____	P_____	()	()
Battery, rechargeable, AA, 2s, heavyduty/branded	pc	2	P_____	P_____	()	()
Battery charger for AA/AAA, with 4 slots, heavyduty/branded	pack	1	P_____	P_____	()	()
			Sub-Total	P_____		
Lot 3			ABC:	37,210.00		
Genuine Brother Ink BT-D60BK, black	bottle	10	P_____	P_____	()	()
Genuine Brother Ink BT-5000, cyan	bottle	8	P_____	P_____	()	()
Genuine Brother Ink BT-5000, yellow	bottle	8	P_____	P_____	()	()
Genuine Brother Ink BT-5000, magenta	bottle	8	P_____	P_____	()	()
Genuine HP Ink, GT 53, black, XL	bottle	10	P_____	P_____	()	()
Genuine HP Ink, GT 52, blue	bottle	6	P_____	P_____	()	()
Genuine HP Ink, GT 52, yellow	bottle	6	P_____	P_____	()	()
Genuine HP Ink, GT 52, magenta	bottle	6	P_____	P_____	()	()
Genuine Epson Ink 001, black	bottle	10	P_____	P_____	()	()
Genuine Epson Ink 001, cyan	bottle	5	P_____	P_____	()	()
Genuine Epson Ink 001, yellow	bottle	5	P_____	P_____	()	()
Genuine Epson Ink 001, magenta	bottle	5	P_____	P_____	()	()
			Sub-Total	P_____		
			Total	P_____		
				Total amount in words:		

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: _____

Tel/Fax No.: _____ Cellphone No.: _____

LBP Account Number of Establishment: _____

Date: _____

Do you have Mayor's/Business Permit ? Yes No

Philgeps Registration? Yes No

Printed Name and Signature of Convasser: _____