

REQUEST FOR QUOTATION

The Philippine Statistics Authority (PSA) through its Bids and Awards Committee (BAC) will undertake alternative mode of procurement, **(shopping, small value, etc.)** for <u>Catering Services</u>

Name of Project	Supply and Delivery of Catering Services
Solicitation	PR No. SSSS-18-09-173
Location	Quezon City
Brief Description	Procurement of Good
Quantity	See attached Bid Form
Approved Budget for the	
Contract (ABC)	₱ 45,000.00
Contract Duration	

Please quote your **lowest price** on the item/s listed below and submit personally your **SEALED QUOTATION not later than 5:00 pm on <u>September 24, 2018</u> at the General Services Division, 11th FIr., Cyberpod One Enton Centris, Diliman, Quezon 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. 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 additional requirements within three days after the opening of bids or during post qualification.
- 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.

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BID FORM

Item/s and specification/s (minimum)	Unit	Qty.	Unit Price	Total Amount (VAT inclusive)	Compliance with Technical Specifications (please check) YES NO	
Workshop on Edit Specifications for CES/SOF	pax	-20-	₱	₱	()	()
Catering Services (Meals) (AM Snack, Buffet Lunch, PM Snack)					()	()
Date of Workshop: 01 to 05 October 2018 Venue: Conference Room, Centris 3 Time: 8:30 Am – 5:30 PM x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x-x					() () () () ()	() () () () () ()
For SSO-SSSS-IESD use				Total amount in words:	() () ()	

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

Printed Name of autho	rized representative/Sign	ature	
Position:			
Name of Company			
Address:		Email Address:	
Fax No	Tel No.:	Cellphone No	
Date:			