

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>Training</u> <u>Services Provider</u>. Details of the procurement are as follows:

Name of Project	ct Training on Policy Writing				
Solicitation No.	PR-ITDS02-19-08-00023				
Location	Metro Manila				
Brief Description	Training Services Provider for the Training on Policy Writing				
Quantity	See attached Bid form.				
Approved Budget for the Contract (ABC)	P 150,000.00				
Date of Delivery					

Please quote your lowest price on the item/s listed on the next page and submit the quotation manually to the BAC Secretariat, 11th Flr., Cyberpod One Eton Centris, Diliman, Quezon City or phraugh the number 374-8283 or email to gsd.staff@psa.gov.ph not later than 11:00 AM on Kindly address your quotation to the Bids and Awards Committee.

CANDIDO J. ASTROLOGO, Jr. BAC Chairberson

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 and/or proposal.
- 3. Late submission of quotation shall not be accepted.
- 4. Bids exceeding the ABC shall be disqualified.
- 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.

PHILIPPINE STATISTICS AUTHORITY REQUEST FOR QUOTATION

Fax no.: 374-82-83/ 374-82-62

BID FORM

Item(s) and specification(s)	Unit	Qty.	Unit Price	Total Amount (VAT inclusive)	Compliance with Technical Specifications (pls. check)	
Minimum					Yes	No
Training Provider and Meals for Policy Writing Training Venue: Within Metro Manila No. of participants: 15 Date: 11 to 13 September 2019 (3 days) Live-out Scope of Training: The training should cover topics per approved PAP and topics relevant to Policy Writing (Please see attached details/ target topics) Inclusions: 1. Training Venue-good lighting, airconditioned room, and can comfortably accommodate 15 participants for lecture, practical exercises, and group writing sessions. 2. Trainer-should have expertise in Policy Writing, knowledgeable in policy formulation and review, knowledgeable in ICT policy, and government policies (international and local/ Philippine setting) 3. Food- set meal for AM snack, lunch, and PM snack. 4. Laboratory-workstations and audio-visual equipment fully set-up/ configured where participants are provided with computers for practical exercises and group writing sessions. 5. Provision of training manual/files (soft copy/ hand-outs for each participant 6. Provision of standard facilities such as water supply, accessible comfort rooms, lighting system, elevator system, elevators, fire escapes, firefighting equipment 7. Provision of standard training equipment and materials such as projector, extension cords, sound system, white screen, papers and pencils, other materials that may be needed during the training 8. Provision of certificate of completion/ participation. 9. Unltimited free wiff access (with stable data speed at the training venue) 10. Provision of free flowing coffee and drinking water at the training room *Must submit proposal NOTE: Please Attach (Mayor's Permit, Tax Clearance, DTI or SEC, PhilGEPS Registration Number and Omnibus Sworn Statement)	pax	15	P	Total amount in words:		()

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

Printed Name of authorized representative/Signature						
Position:						
Name of Company						
Address:		Email Address:				
Fax No	Tel No.:	Cellphone No				
Date:						