REPUBLIC OF THE PHILIPPINES
PHILIPPINE STATISTICS AUTHORITY

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 **Training Services Provider.** Details of the procurement are as follows:

Name of Project	**Linux Server Administration Training**
Solicitation No.	PR-ITDS02-19-08-00024
Location	Metro Manila
Brief Description	**Training Provider and Meals for Linux Server Administration**
Quantity	See attached Bid form.
Approved Budget for the Contract (ABC)	**₱ 300,000.00**
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 through facsimile number 374-8283 or email to gsd.staff@psa.gov.ph not later than 11:00 AM on

SEP 10 2019. Kindly address your quotation to the Bids and Awards Committee.

CANDIDO J. ASTROLOGO, Jr.
BAC 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 and/or proposal.

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.

BID FORM

Item(s) and specification(s) Minimum	Unit	Qty.	Unit Price	Total Amount (VAT inclusive)	Compliance with Technical Specifications (pls. check)	
					Yes	No
Training Provider and Meals for Linux Server Administration **Venue:** within Metro Manila **No. of Participants:** 15 **Date:** 23 to 27 September 2019 (5 days) Live out **Scope of Training:** The training should cover topics per approved PAP and other topics relevant to Linux Server Administration (Please see attached target topics) **Inclusions:** 1. **Training Venue** – good lightning, air-conditioned room, and can comfortably accommodate 15 participants 2. **Trainer** – should have expertise in installation, configuration and administering/managing Linux server in Centos, Ubuntu and Fedora platform 3. **Food** – set meal for AM snacks, Lunch, and PM snacks 4. **Laboratory** – server and workstations fully set up and configured – where each participants is provided with one computer each for laboratory exercises 5. **Provision of Laboratory Files/Training Manual** (soft copy/hand-outs) for each participant 6. **Provision of standard facilities** such as water supply and accessible comfort rooms, lighting system, elevators, fire escapes, firefighting equipment 7. **Provision of standard training equipment** such as projector, extension cords, sound system, white screen, paper and pencils, other materials/equipment that may be needed during the training 8. **Provision of Certificate of Completion/Participation** 9. **Unlimited free Wi-Fi access** (with stable data speed) at the training venue 10. **Provision of free flowing coffee and drinking water** at the training room *Please attach Proposal/Course Syllabus *NOTE: Please Attach (Mayor's Permit, Tax Clearance, DTI or SEC, and PhilGEPS Registration Number)*	pax	15	P_____	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: _____