



PHILIPPINE SCIENCE HIGH SCHOOL
MIMAROPA REGION CAMPUS

REQUEST FOR QUOTATION
FORM AND NOTICE

Project: **SUPPLY AND DELIVERY OF BASIC COMMODITIES FOR GAD-COVID19 PROJECT**

The PHILIPPINE SCIENCE HIGH SCHOOL - MIMAROPA REGION CAMPUS (PSHS-MRC) intends to apply the sum of **ONE HUNDRED TWENTY-TWO THOUSAND FIVE HUNDRED PESOS ONLY (PhP122,500.00)** being the Approved Budget for the Contract (ABC) to pay for the contract for the Project: **SUPPLY AND DELIVERY OF BASIC COMMODITIES FOR GAD-COVID19 PROJECT**

1. The PSHS-MRC now invites qualified suppliers/manufacturers/dealers to submit price quotations for the above item with the following specifications:

1.1 Please see attached request for quotation form.

SUPPLY AND DELIVERY OF BASIC COMMODITIES FOR GAD-COVID19 PROJECT

2. Procurement will be conducted through one of the Alternative Modes of Procurement which is "Small Value Procurement" specified under RA 9184, and its Revised IRR, otherwise known as the "Government Procurement Reform Act".

3. Eligibility Requirements for Small Value Procurement are:

- a.) Certificate of Registration
 - b.) Updated Mayor's Permit
 - c.) Updated DTI / SEC Registration
 - d.) Updated Quarterly Income Tax Return / Tax Clearance
 - e.) PhilGEPs Certificate of Membership / Registration or Snapshot of Registered Account in PhilGEPs
 - f.) Notarized Omnibus Sworn Statement
 - g.) Landbank Passbook Account and Snapshot of Account in Landbank System for Payment Purposes
- | Alternative is through Check Payment if Supplier has no Landbank Account
- h.) Filled out Supplier's Information Sheet

4. Interested suppliers may obtain the Request for Quotation (RFQ) Form from the Finance and Administrative Division (FAD), PSHS-MRC c/o Ms. MARIGEN F. FRONDA, (0906-591-5253 (Globe) / bacsec@mrc.pshs.edu.ph on September 10, 2020 - September 14, 2020 from 8:00am – 5:00pm without cost.

5. The deadline for submission of duly accomplished RFQ Form (Open or Sealed) is on September 14, 2020, 5:00 pm. Suppliers are not required to attend the Opening of Quotations.

6. The winning supplier will be notified in writing or by phone or otherwise by the Head of the Procuring Entity (HOPE) subject to the provisions of RA 9184 and its Revised IRR.

7. The PSHS-MRC reserves the right to accept or reject any price offer, and to annul the procurement process and reject all offers at any time prior to contract award, without thereby incurring any liability to the affected supplier or suppliers.



JOANE C. DALISAY
BAC Chairperson - Goods



Republic of the Philippines
Department of Science and Technology
PHILIPPINE SCIENCE HIGH SCHOOL - MIMAROPA REGION CAMPUS
Brgy. Rizal, Odiongan, Romblon

REQUEST FOR QUOTATION

Quotation No.:
Date:

2020-09-PR065
1-Sep-20

GENTLEMEN:

May we request for quotation on materials enumerated hereunder. If you are interested and in a position to furnish the same, we shall be glad to have your best prices.

DELIVERY WITHIN 5 CALENDAR DAYS UPON RECEIPT OF APPROVED PURCHASE ORDER (P.O)

In case of failure to make the full delivery / completion within the time specified as offered / required, the Supplier / Contractor shall be liable for liquidated damages / penalty of one-tenth (1/10) of one percent (1%) of the Contract Price per calendar day of delay minus the value of the delivered / completed portion (s) of the approved P.O. / Contract.

ITEM #	QTY	UNIT	ITEM / DESCRIPTION	UNIT COST	TOTAL COST
PRICES MUST BE TAX (VAT) INCLUSIVE					
LOT 1	50	sack	Rice 25kl / Sack		
			Assorted Goods		
	100	can	Sardines		
	100	can	Meatloaf		
	100	can	Corned beef		
	300	pc	Noodles		
	100	pc	CoFFE		
			Instant Coffee Sticks 2g (48 Sticks)		
	100	pc	Sugar 1kls each		
			Nothing Follows		
			TOTAL		

DELIVERY TERM: _____
DELIVERY TIME: DELIVERY WITHIN 5 CALENDAR DAYS UPON RECEIPT OF APPROVED PURCHASE ORDER (P.O)
PAYMENT TERM: WITHIN 30 CALENDAR DAYS UPON COMPLETION OF DELIVERY

Very Truly Yours,

MARIGEN F. FRONDA
 Designated Supply Officer
 Mob. No.: 0906-591-5253
 Email: bacsec@mcrc.pshs.edu.ph

PRICES IN THE ABOVE OFFER ARE CERTIFIED TRUE AND CORRECT:

Authorized Company Representative: _____
(Signature over Printed Name)

Company Name: _____

Address: _____

Mobile No., Tel. No.: _____

T.I.N.: _____

IMPORTANT
 1. Prices must be typewritten in ink clearly.
 2. If offering a substitute / equivalent , specify brand name and make