



REPUBLIC OF THE PHILIPPINES  
**PHILIPPINE STATISTICS AUTHORITY**  
REGION X – NORTHERN MINDANAO



**REQUEST FOR QUOTATION**  
**RFQ No. 089**

Date: \_\_\_\_\_

Name of Establishment: \_\_\_\_\_

Address: \_\_\_\_\_

Business Permit No.: \_\_\_\_\_ TIN: \_\_\_\_\_

PhilGEPS Registration No. \_\_\_\_\_

The Philippine Statistics Authority – Regional Statistical Services Office X, (PSA-RSSO X) through its Regional Office Bids and Awards Committee (ROBAC), will undertake an **Alternative Mode of Procurement** through **Negotiated Procurement** for the items stated below, in accordance **with Section 53.9 (Small Value Procurement)** of the 2016 Revised Implementing Rules and Regulations of Republic Act No. 9184. Details of the procurement are as follows:

<b>Name of Project</b>	Procurement of Toner
<b>Location</b>	Cagayan de Oro City
<b>Date of Delivery</b>	25 June 2025
<b>Quantity</b>	See attached bid form
<b>Terms of Payment</b>	30 working days upon receipt of Statement of Account and must accept send bill policy
<b>Approved Budget for the Contract (ABC)</b>	One Hundred Thirty-Six Thousand Pesos Only (PhP136,000.00)

We hereby invite all interested suppliers to submit quotations/proposals duly signed by authorized representatives not later than **17 June 2025, 12NN**, subject to the Terms and Conditions provided. If you haven't provided the PSA a copy of your **Mayor's/Business Permit** and **PhilGEPS Registration Number**, please submit these documents along with your accomplished quotation. The Omnibus Sworn Statement must be submitted within three days upon notification of the ROBAC of the lowest calculated quotation. Failure to submit the Omnibus Sworn Statement within the given period shall be a ground for post-disqualification.

Open quotations maybe submitted manually to the PSA Canvasser or personally to the ROBAC Secretariat or through email at **psa10rbac@gmail.com**.

For any clarification, you may contact **Ms. Margie Mae L. Pino** at **09178219152**.

  
JOSE B. TUASON, JR., CPA  
ROBAC Chairperson



## **General Terms and Conditions**

1. Bidders shall provide correct and accurate information required in this form, Failure to use this form will result to disqualification of your bid.
2. Partial bid is not allowed.
3. Price quotation, in peso denomination, must be valid for a period of 30 calendar days from the date of submission. It shall include all taxes, duties and/or other charges.
4. Quotations exceeding the Approved Budget for the Contract shall be rejected.
5. Late submission of quotation shall not be accepted.
6. Any interlineations, erasures or overwriting shall be valid only if they are signed or initialed by you or any of your duly authorized representative/s.
7. The Table of Rating Factors for Lease of Venue as provided in the IRR of RA 9184 shall be used in the evaluation of the venue and room accommodation. The passing rate is 90 percent.
8. Award of contract shall be made to the supplier with the highest rated bidder compliant to the minimum technical specifications and general terms and conditions stated herein.
9. In case of two or more bidders are determined highest rated bidders, the PSA shall adopt and employ 'draw lots' as the tie-breaking method to finally determine the single winning provider in accordance with GPPB Circular 06-2005.
10. The goods must be delivered according to the requirements specified in this RFQ.
11. Payment shall be prepared through check/Advice to Debit Account (ADA) upon receipt of the supplier's Statement of Account, subject to deduction of applicable taxes.
12. The PSA reserves the right to reject any or all quotations, to declare failure of bidding, to reject all quotations/bids at any time prior to contract award, without thereby incurring any liability to the affected Bidder(s), and to accept only the offer that is most advantageous to the Government.
13. Liquidated damages equivalent to one tenth (1/10) of one percent (1%) of the value of the goods not delivered within the prescribed period shall be imposed per day of delay. The PSA shall rescind the contract once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, without prejudice to other courses of action and remedies open to it.

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Name and Signature of Authorized Representative



# BID FORM

## Instructions:

1. Accomplish this RFQ correctly and accurately.
2. Do not alter the contents of this form in any way.
3. Technical specifications with asterisks (\*) are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
4. Failure to follow these instructions will disqualify the entire quotation.
5. Failure to use this form will disqualify your quotation.
6. Please do not leave any blank items. Indicate "0" if item is being offered for free.

After having carefully read and accepted the Terms and Conditions. I/We submit our quotation for the item/s as follows:

No.	Technical Specification/s	Unit	Qty	Offered Price (inclusive of taxes and other fees)		Compliance to Technical Specifications		Remarks
				Unit Price	Amount	(Please Check)		
						Yes	No	
A	B	C	D	E	F = DxE	G	H	
1	HP Laser Jet Pro M454DN Colored Toner	cart	4					
	Toner Color Number: W2042A							
	Tone Type: 416A							
	Color: Yellow							
2	HP Laser Jet Pro M454DN Colored Toner	cart	4					
	Toner Color Number: W2043A							
	Tone Type: 416A							
	Color: Magenta							
3	HP Laser Jet Pro M454DN Colored Toner	cart	4					
	Toner Color Number: W2041A							
	Tone Type: 416A							
	Color: Cyan							
4	HP Laser Jet Pro M454DN Colored Toner	cart	4					
	Toner Color Number: W2040A							
	Tone Type: 416A							
	Color: Black							
5	HP Laser Jet Pro M404DN Black	cart	4					
	Toner Color Number: CF276A							
	Tone Type: 76A							
	Color: Black							

No.	Technical Specification/s	Unit	Qty	Offered Price (inclusive of taxes and other fees)		Compliance to Technical Specifications		Remarks
				Unit Price	Amount	(Please Check)		
						Yes	No	
	TOTAL OFFERED PRICE (in words and in figures)							

Printed Name of authorized representative / Signature: \_\_\_\_\_

Position: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

Fax No. \_\_\_\_\_ Tel No.: \_\_\_\_\_ Cellphone No: \_\_\_\_\_

Date: \_\_\_\_\_