

| April 12, 2022 |  |
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| Data           |  |

## REQUEST FOR QUOTATION SMALL VALUE PROCUREMENT

## **INSTRUCTION:**

- Bidders are required to read the instructions and fill all the blanks properly, Prospective Bidders/Suppliers
  are required to use this official canvass form in accomplishing their bid proposals/quotation.
- 2. Any specifications other than those required/stated in this form shall not be considered in their evaluation of bid.
- 3. Quotation must be the lowest price(s), taxes included for the item(s) services listed hereunder including delivery charges.
- 4. Always indicate the brand name of the offered items (s) or product.
- 5. Price quotation(s) submitted shall be valid for ONE HUNDRED TWENTY DAYS (120) days reckoned from the deadline for submission of quotations.
- 6. Terms of payment-Thirty (30) days from delivery of items(s)
- 7. Only sealed quotations shall be considered by BAC. The Bidders/Suppliers or Authorized Representative shall indicate on the envelope the RFQ Number and the company name of the bidder/supplier.
- 8. Awarding shall be done by LOT /CATEGORY only.
- 9. Delivery and/or Installation Period: Schedule date upon receipt of Notice to Proceed

|           | NVQSD          | DEADLINE FOR SUBMISSION  | OF BIDS   | April 19, 2022             |               | 4:00 PM                      |                   |
|-----------|----------------|--|---|----------------------------|---------------|------------------------------|-------------------|
|           | 2022-04-       |  |   | Date                       |               | Time                         |                   |
| PR No.    | 077            | End-user:  | BENJAMIN D. BAJO, JR. ABC: 200,000.00                                     | 1                          | 0"            | ı                            | I                 |
| Qty.      | Unit           |  | Item/Description  | ABC (PhP)                  | Offered brand | Unit price                   | Total cost        |
|           |                |  | vil Service Examinations Review (Service Provider)                        | 200,000.00                 |               |                              |                   |
|           |                | Duration (Day): Five (5) consecutive Saturdays (May 14, 21, 28, June 4 & 11) |   |                            |               |                              |                   |
|           |                | Maximum of 200 participants  |   |                            |               |                              |                   |
|           |                | Scope of work:   |   |                            |               |                              |                   |
|           |                | Review schedule is su<br>service provider                                    | bject to adjustment and finalization between the end-user and th          | е                          |               |                              |                   |
|           |                | 2. Organize a team of co   | mpetent review lecturers  |                            |               |                              |                   |
|           |                | 3. Take charge of the pro  | ovision of the video conference plat form (e.g. zoom)                     |                            |               |                              |                   |
|           |                |  | als/practice tests to the participants                                    |                            |               |                              |                   |
|           |                | 5. Administer a pre-test a<br>Venue:   | and post-test   |                            |               |                              |                   |
|           |                |  | nation Center (AHTIC), BAI Compound, Visayas Avenue, Diliman,             |                            |               |                              |                   |
|           |                |  | gned outside the Central Office shall be through Virtual/Online.          |                            |               |                              |                   |
|           |                | Quezon only while those assig  | gred outside the oerital office shall be through virtual/offiline.        |                            |               |                              |                   |
|           |                |  |   |                            |               |                              |                   |
|           |                |  |   |                            |               |                              |                   |
|           |                |  |   |                            |               |                              |                   |
|           |                |  |   |                            |               |                              |                   |
|           |                |  |   |                            |               |                              |                   |
|           | LOLITA         | M. JUMALON   |   | DΔ                         | шен           | MSON, DVM                    |                   |
|           |                | PS Posted  |   |                            |               | wards Commi                  | ttee              |
|           | 0.2            | 1 0 1 00.00  |   | Ondir, D                   | 140 4114 71   | wardo commi                  |                   |
|           |                |  | CANVASSER'S CERTIFICATION   |                            |               |                              |                   |
|           |                |  | nd responsibility in distributing and/or collecting the Request for Quota | tion in accordance to the  | guidelines    | s in securing p              | orices for        |
| the Bure  | au of Animal   | Industry.  |   |                            |               |                              |                   |
|           |                |  | (Signature Over Printed Name)   |                            |               |                              |                   |
| The DAI   | Dido and Au    | randa Cammittaa (DAC)  | Authorized Canvasser  |                            |               |                              |                   |
|           |                | rards Committee (BAC)<br>man, Quezon City                                    |   |                            |               |                              |                   |
| visayas i | Availue, Dilli | nan, Quezon Oity   |   |                            |               |                              |                   |
| Sir/Mada  | m·             |  |   |                            |               |                              |                   |
| Oll/Madd  |                |  |   |                            |               |                              |                   |
|           |                |  |   |                            |               |                              |                   |
| In conne  | ction with the | e above request, I/We hereby sub   | mit our quotation indicated above. I/We have carefully read and fully     | understand the minimum     | requireme     | ents and agree               | e to furnish      |
| and/or ef | fect delivery  | in conformity with specifications a  | any or all said articles/services described above within worki            | ng days from receipt of Po | urchase C     | Order.                       |                   |
|           |                |  |   |                            |               |                              |                   |
|           |                |  |   |                            |               |                              |                   |
| Signature | e Over Printe  | ed Name  | Name of Company   |                            |               | Tax Identifica               | ation Number      |
|           |                |  |   |                            |               | /Ta ha £11ad l               | ١٠٠١ (٢٠٠٠ - ١١٠١ |
|           | Tolonho        | one Number(s)  | Address   |                            |               | (To be filled by Date accomp |                   |
|           | reiehuc        | חום ויינוווטפו (פ)   | Address   |                            |               | שמום מטטווון                 | nioi ICU          |
| Manda     | tory Pegu      | irements for submission:   |   |                            |               |                              |                   |
|           | iyor's Permit  |  | √ Income Tax Return (for ABCs above P500k)                                |                            |               |                              |                   |
|           | •              | stration/Certificate (Updated)   | ✓ Omnibus Sworn Statement (For ABCs above                                 |                            | S mav         |                              |                   |
|           |                | osouto (opaatoa)   | be submitted provided that the notarized OSS s                            |                            |               |                              |                   |
|           |                |  | issuance of Notice of Award   |                            |               |                              |                   |

Rev. No.: 03 Nov. 15, 2021