



Republic of the Philippines
SOCIAL SECURITY SYSTEM
NCR OPERATIONS – WEST DIVISION
 232 G/F Padilla Delos Reyes Bldg. Juan Luna St.
 Binondo, Manila
 Tel. 8395-9897

CANVASS FORM

WEST 2023-JULY-01
 Friday, July 07, 2023

PHILGEPS REF. NO. _____
 DATE POSTED: _____
 POSTED BY: _____

Sir / Madam:

Please furnish us with your quotation on or before: _____ at 4:00 pm. for the following items:

NO.	QUANTITY	UNIT OF MEASURE	PARTICULARS	UNIT PRICE FOR BID	TOTAL PRICE FOR BID
1	450	pcs.	ENVELOPE - EXPANDABLE WITH FLAP AND TIE		
Approved Budget per unit			22.00	Total Approved Budget	
TECHNICAL SPECIFICATION:			10" x 15" x 2"	Statement of compliance	
NO.	QUANTITY	UNIT OF MEASURE	PARTICULARS	UNIT PRICE FOR BID	TOTAL PRICE FOR BID
1	60	ROLLS	PAPER - ADDING MACHINE TAPE		
Approved Budget per unit			24.00	Total Approved Budget	
TECHNICAL SPECIFICATION:			2-1/4"	Statement of compliance	
NO.	QUANTITY	UNIT OF MEASURE	PARTICULARS	UNIT PRICE FOR BID	TOTAL PRICE FOR BID
1	15	pcs.	RIBBON - ERC-31		
Approved Budget per unit			310.00	Total Approved Budget	
TECHNICAL SPECIFICATION:			For TMU-950 (Epson)	Statement of compliance	
NO.	QUANTITY	UNIT OF MEASURE	PARTICULARS	UNIT PRICE FOR BID	TOTAL PRICE FOR BID
1	100	pcs.	EMPTY CARTONS		
Approved Budget per unit			250.00	Total Approved Budget	
TECHNICAL SPECIFICATION:			15" x 17"	Statement of compliance	
NO.	QUANTITY	UNIT OF MEASURE	PARTICULARS	UNIT PRICE FOR BID	TOTAL PRICE FOR BID
1	100	pcs.	CORRUGATED BOX		
Approved Budget per unit			350.00	Total Approved Budget	
TECHNICAL SPECIFICATION:			12W x 15L x 10H	Statement of compliance	
TOTAL BID (1 LOT)				PHP	
TOTAL APPROVED BUDGET FOR THE CONTRACT				PHP 75,990.00	

Payment Terms: Supplier shall be paid in accordance to Government Terms.
 Delivery Terms: 15 Calendar Days upon receipt of approved Purchase Order/Job Order.
 Price Validity: Three (3) Months

Notes:

- For canvass with an ABC of P 100,000.00 and above the winning bidder is required to post a Performance Bond within Three (3) Calendar from receipt of Notice to Proceed/Job Order/Purchase Order equivalent to 5% Cash, Cashier's/Manager's Check, Bank Guarantee/Draft or 30% Surety Bond callable upon demand of the contract price.
- The SSS shall withhold the applicable taxes from the amount payable in accordance with BIR regulations.
- Please specify the brand name / model offered.
- For clarification of details, please coordinate with Nathalie G. Alonde at telephone no. 8395-9897
- Quotations not using the prescribed/standard canvass form and/or unsealed shall automatically be disqualified.
- Indicate the **correct SSS Number and TIN-(BIR) of supplier/contractor** in the quotation form.
- The bidder shall offer one (1) quotation only, alternative bids shall be rejected.
- Please send your **SEALED QUOTATION/CANVASS/BID** to **232 Padilla delos Reyes Bldg., Juan Luna St., Binondo, Manila**, including the following Eligibility Requirements:
 - Registration Certificate from SEC (Security Exchange Commission), DTI (Department of Trade & Industry) for sole proprietorship, or CDA (Cooperative Development Authority) for cooperatives, or any proof of such registration.
 - Mayor's Permit issued by the city or municipality where the place of business of the prospective bidder is located.
 - BIR 2303
 - Latest Form SSS R-5 Contributions Payment
 - PhilGeps Registration
- All payments to suppliers/creditors/payees shall be done electronically and directly credited to their **Landbank Account**. When supplier prefers other banks, any charges or fees that will be imposed by the bank shall be charged to supplier's account.

This is to certify that my Company is updated in the payment of **contributions** and **loans** to SSS and the data / quotation indicated are valid.

 Owner/Company Representative
 (Sign over Printed Name)

REMINDER: Price quotation should be made with extra care taking into account the specification and unit of quantity to avoid errors. The offeror binds himself to this quotation **TERMS & CONDITIONS**.

Very truly yours,

Please indicate below your Business Name, Address and Telephone Number and Date Received.

Your Business Name: _____
 Your Business Address: _____
 Your Business SSS No.: _____
 Your Business TIN No.: _____
 Your Landbank Account No.: _____
 Your PhilGEPS Reg. No.: _____
 Bank Account No.: _____
 E-mail Address: _____
 Telephone Nos.: _____
 Date Received: _____

DANIEL T. CAPUT
 Chairperson, LBAC
 NCR West Division