



**Republic of the Philippines
SOCIAL SECURITY SYSTEM
East Avenue, Diliman, Quezon City**

REQUEST FOR QUOTATION

2020-0009

January 20, 2020 **PHILGEPS REF. NO.: 6808903**
Date **DATE POSTED : 01-21-20**
POSTED BY : ERIKA

Sir / Madam:

Please furnish us with your quotation on or before **January 27, 2020 @ 10:00AM** the following items:

No.	Quantity	PARTICULARS	Unit Cost																																																																														
1	1 Lot (23 – 30 Pax per session)	Hiring of food catering services for BAC Meetings & Activities for February to March 2020 to be held at SSS Main Office, East Avenue, Diliman, Quezon City with the following requirements: a.) AM / PM Snacks *Serving Time : At around 11:00AM / 3:00PM *Menu : Pasta / pansit dish with pastry or Sandwiches or Traditional Filipino delicacy with side dish : Coffee / Tea *ABC : P 75.00 / Pax ADDITIONAL REQUIREMENTS:	P _____/Pax																																																																														
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Payment Terms: Government Terms (Payment is upon delivery of items / services & submission of billing documents.

Price validity : Three (3) Months.

- NOTE/S:**
- 1.) For canvass with an ABC of P 100,000.00 and above**, the winning bidder is required to post a Performance Bond from receipt of Notice of Award equivalent to 5% Cash (Goods & Consulting Services) & 10% Cash (Infrastructure), Cashier's / Manager's Check, Bank Guarantee / Draft or 30% Surety Bond callable upon demand, of the contract price.
 - 2.) Supplier is required to indicate his PhilGeps Registration Number on the canvass form.**
 - 3.) SSS shall withhold the applicable taxes from the amount payable in accordance with the BIR regulations.**
 - 4.) The number of participants / quantity of items / schedule of event is subject to change.**
Payment for the above reservations shall be based on the actual number of participants & their actual expenses but not to exceed of the approved PO.
 - 5.) Alternative offer is not allowed.**
 - 6.) For clarification of details, please call Ms. Blue Condat / BAC-SEC @ 920-6401 local 5492.**

This is to certify that my Company is updated in the payment of contributions and loans to SSS, and conformed with the above terms & conditions, 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.

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

Your Business SSS No. _____

PhilGeps Registration No. _____

T I N no. _____

Date Received : _____

(Business Name)

(Address & Telephone No.)

(E-mail Address)

Very Truly Yours,

Hydee R. Raquid
HYDEE/R. RAQUID

Department Manager III

Procurement, Planning & Management Department

Tel No. 920-6401 loc 5504-5507

Fax No. 435-9861

E-mail Address: bansilea@sss.gov.ph; pmd@sss.gov.ph