



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

REQUEST FOR QUOTATION

2020-0090

SEALED CANVASS

June 17, 2020  
Date

PHILGEPS REF NO.: 7052185  
DATE POSTED : 06-17-20  
POSTED BY : ERIKA

Sir / Madam :

Please furnish us with your quotation on or before **JUNE 22, 2020 @10:00AM** for the following items:

No.	Quantity	PARTICULARS	Unit Cost	Total Cost
1	1 LOT	<b>TRAINING PROVIDER</b> for the following Accounting Standards:  a. PFRS 4 and IFRS 17 - Insurance Contracts b. PFRS 9 - Financial Instruments c. PFRS 15 - Revenue from Contracts with Customers d. PAS 37 - Provisions, Contingent Liabilities, and Contingent Assets  <i>(Please see attached 'TERMS OF REFERENCE' for the Scope of Work, Expected Output &amp; Deliverables, and Qualifications of Training Provider)</i>  TOTAL ABC = <b>P 995,000.00 / Lot</b> 2020 APP No. 2 (June 4th Update) – Training Provider for Accounting Standards - Intervening Programs PPMD Request No. 2020-0199 dated 06/17/2020 (revised)	P _____/Lot	P _____

**Delivery Terms:** The engagement shall be undertaken and completed in a period of Three (3) Months or Twelve (12) weeks after receipt of Notice to Proceed (NTP).

**Payment Terms:** Please refer to the Payment Schedule mentioned in the Terms of Reference

**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.) **Alternative offer is not allowed.**
  - 5.) **Schedule of Training is subject to change.**
  - 6.) **Documents showing compliance to "Qualifications of Training Provider" must be submitted along with the sealed quotation. Failure to submit complete documents will result to disqualification.**
  - 7.) **For further clarification of details, please contact Ms. Jennie Ann V. Andres at 8920-6401 loc 6459 or send an e-mail to andresjv@sss.gov.ph**

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**

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**

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