

Republic of the Philippines SOCIAL SECURITY SYSTEM CAUAYAN ISABELA BRANCH Cauayan City, Isabela

CANVASS FORM

LN2D - 2022 - 003

SEALED CANVASS

MN7 (4 2022 Date

Sir / Madam:

Please furnish us with your quotation on or before Mh795 2022 @ 21m for the following items:

No.	Quantity	PARTICULARS	Unit Cost	Total Cost
1	1 Lot	Messengerial services at SSS Cauayan, OVP LND2 & LND2 Legal Department for the period May to December 2022 with the following requirements: Letter (max 100 grams) Amount per item not to exceed: 110 pcs Metro Manila ABC = P120.00 per piece 111 pcs Luzon ABC = P110.00 per piece One Pound (max 500 grams) 110 pcs Metro Manila ABC = P150.00 per piece 110 pcs Luzon ABC = P130.00 per piece Three Pounder (max 1,500 grams) 85 pcs Metro Manila ABC = P 270.00 per piece		
Term	s and Condi	51 pcs Luzon ABC = P 240.00 per piece tions:		
	2. No cash 3. Delivery 4. Shall ens	terms: supplier shall be paid based on billing every 30 days bond will be required from SSS terms: Staggard for twelve (12) months ure "NEXT-DAY DELIVERY" of packages/mails. the right to terminate the contract without prior notice		
		GRAND TOTAL ABC = P 91,400.00		

Delivery Terms: Staggard for Twelve (12) Months

Payment Terms: Supplier shall be paid in accordance to Government Terms.

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.

- For canvass with an ABC of P 50,000.01 and above, the supplier is required to indicate
 his PhilGeps Registration Number on the canvass form.
- The SSS shall withhold the applicable taxes from the amount payable in accordance with the BIR regulations.
- 4.) For clarification of details, please call Mr. Regar D. Garcia at (078) 652-1215.

This is to certify that my Company is updated in the payment of contributions and loans to SSS and the data and 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.

Please indicate below your Business Name,	Very Truly Yours,		
Address and Telephone Number and Date Received.	REYNANTE T. FERNANDO Branch Head I SSS Cauayan Isabela Branch		
Your Business SSS No			
PhilGeps Registration No			
T I N no			
Date Received :			
	Tel No. (078) 652-1215		
(Business Name)	Canvass made by:		
(Address & Telephone No.)	REGAR D. GARCIA		
	CEOI		
(E-mail Address)			