

PHILIPPINE POSTAL CORPORATION

RFQ# 165-10-24

(Canvass Number)

21-Oct-24

(Date)

REQUEST FOR QUOTATION

(Name of Dealer)

(Address)

Gentlemen:

The Philippine Postal Corporation through its Bids and Awards Committee - Alternative Methods of Procurement (BAC-AMP) invites all interested qualified Service Providers/Suppliers to quote their best offer/price inclusive of all costs and applicable taxes, subject to the General Conditions stated herein, and to submit the said quotation duly signed by its authorized representative not later than 25 October 2024, 10.00 A.M. at the Isolation Facility Building, CMEC Compound, Domestic Road, Pasay City

NAME OF PROJECT: Procurement of Printing and Delivery of Commemorative Cover and Personalized Stamps featuring "88th Anniversary of the Philippine College of Surgeons"

General Conditions:

- 1 All entries must be typewritten or legibly written.
2 The valid Philgeps Registration Certificate/Number, Mayor's or Business Permit, and Revised Omnibus Sworn Statement are required to be submitted along with your quotation/proposal on the date stated above.
3 Price validity must be within 30 working days from the date of submission.
4 Delivery period shall be seven (7) calendar days commencing on the date of receipt of PO/Notice to Proceed and upon receipt of approved final proof of design.
5 Payment shall be processed upon completion and acceptance by PHLPost and the submission of the required supporting documents.
6 Quotation exceeding the ABC per item and the total ABC shall be automatically rejected.
7 Bidder/s shall submit a duly signed quotation together with the 2024 documentary requirements.

(FAILURE TO DO SO WILL MEAN DISQUALIFICATION OF YOUR PROPOSAL)

Very truly yours,

ENGR. RICARDO C. MEDINA JR.
A/Chief, Procurement Div., LPMD

NOTE:

For issue to PPMD-OPMG

Table with 7 columns: Item No., ABC (PhP), Qty./ Unit, SPECIFICATIONS, Compliance checkboxes, Unit Price, Total Amount. Includes rows for Commemorative Cover and Personalized Stamp, and a total row showing 80,088.00.

Date of Delivery: \_\_\_\_\_

Option: \_\_\_\_\_

(Signature Over Printed Name of Dealer)

(Telephone Number)