

## Republic of the Philippines Province of Pampanga

## **Bids and Awards Committee**

Provincial Capitol, City of San Fernando, (P) / (045) 435-5901

SEP 2 0 2024

RFO No. 240935

P.R. No. / Date / End User / Purpose:

(24-4937 9/19/2024 PHO - PUBLIC HEALTH Catering Services for Post Activity Assessment between Starkey Hearing Foundation with UNIVERSITY OF STO. TOMAS AND PROVINCIAL GOVERNMENT OF PAMPANGA ON SEPTEMBER 29, 2024.)

	REQUEST FOR QUOTATION	-
	Small Value Procurement	
Company Name:		
Address:		
Tel. No.:		

Please quote your lowest price for the requirements listed hereunder subject to the Terms and Conditions stated below and submit to this Office duly signed by you or your representative not later than 4:00 p.m. SEP: 2 4 2024

APPROVED BUDGET FOR THE CONTRACT (ABC): PhP 450,000.00 FRANCIS V. MASLOG
VICE-CHAIRPERSON P.
Bilds and Avends Committee

## **TERMS AND CONDITIONS**

- All quotations may be typewritten or handwritten, placed in a sealed envelope.
- All quotations shall be valid for one hundred twenty (120)
   calendar days from the deadline of the submission of the same.
- Any erasures or overwriting shall be valid only if they are signed or initialed by the supplier or its authorized representative.
- Interested suppliers are required to submit their valid current Mayor's Permit, PhilGEPS Registration Number, and Income/BiR Tax Return (for ABCs above P500,000,000) upon submission of quotation. In lieu of the Mayor's Permit and PhilGEPS Registration Number, the PhilGEPS Certificate of Platinum Membership may be submitted. For new businesses, submit the BIR Certificate of Registration and latest quarterly return or percentage tax...
- The applicable rate for late deliveres is one tenth (1/10) of one percent (1%) of the cost of the underformed portion for everyday of delay.
- The Provincial Government of Pampanga reserves the right to accept or reject any quotation, and to annul the procurement process and reject all quotations at any time prior to contract award, without thereby incurring any liability to the affected supplier/s.
- The PGP also reserves the right to waive any required formality in the proposals received, and select the proposal which it determine to be the most advantageous to the government.

Item No.	Qty	Unit	Item Description	Unit Price	Total Price
1	300	PAX	CATERING SERVICES FOR POST ACTIVITY ASSESSMENT BETWEEN STARKEY HEARING FOUNDATION WITH UNIVERSITY OF STO. TOMAS AND PROVINCIAL GOVERNMENT OF PAMPANGA ON SEPTEMBER 29, 2024  MEAL REQUIREMENTS: 1. Food should be a Classy Buffet Set-up. Guests can fill the plates as many times as they like. 2. Modern Table centerpieces. 3. Dining Set-up with glass wares and silverwares. 4. Table Linens and chairs with cover. 5. Must have fully equipped food service facility within the locality. 6. With Complimentary Drinks 7. Free Flowing Coffee 8. Well Trained uniformed waiters.		
			MENU: Lumpiang Shanghai, Kinamatisan na Baka, Chicken Bringhe, Ginisang Sitaw at Kalabasa, Fried Tilapia, Lechon Manok, Mechadong Baka, Ginataang Kuhol, Lechon Belly, Kapampangan Salad, Crab Paste Vinaigrette, Okoy, Pansit Mix, Soft Roll Bread, Garlic Toast Bread, Leche Plan, Rice & Fresh Fruit in Season		

Item Description	Unit Price	Total Price
AFTER SALES SERVICE:		
> Served spoiled & Soiled meals must be replace within 1 hour upon		
notification of the End-User.	76.00	
CONTRACT OF DECLINATION OF		
SCHEDULE OF REQUIREMENTS:		No. of the last of
> Changes in the date and time upon notification by the End-User on a 24 hour advance notice		
flour advance notice	110000	
>Final venue within Clark will be subject to at least 24 hours advance notice		
The second secon		
Total Lot Price		
ning supplier shall submit a duly signed and notarized Omnibus Sworn Statement prin	POPOS CONTRACTOR DE LA	
o 17 September 2017 Statement price	ir to notice of award	1.

carefully read and accepted your To	erms and Conditions, including the	ne technical specifications	I/We offer to supply/deliver the
as noted above.		DESCRIPTION OF THE PROPERTY OF	in the other to supply/deliver the

er's authorized representative signature over printed name lation:	BAC CANVASSER
t No.;	
Address.:	May