



SUBIC BAY METROPOLITAN AUTHORITY PROCUREMENT AND PROPERTY MANAGEMENT DEPARTMENT

Room 201 Bldg. 255, Barryman Road, Subic Bay Freeport Zone, Philippines
 Tel. Nos. (047) 252-4503/4124/4211/4283/4230/4214/4424/4282 Fax. No. (047) 252-4284/4251

QUOTATION FORM

You may send your quotation via email to sbmapcmd@gmail.com
 email with "cc/bcc" WILL NOT BE ACCEPTED.

Approved Budget for the Contract: **P247,525.00**

For inquiries, contact: **CAROL DIWA** at Tel. No. (047) 252- **4211** REFERENCE: **0 0 0 1 6 - 2 3 - 0 3 2 0 - 0 0 9 8**

This is a "REQUEST FOR QUOTATION" for items listed below. Pls submit your quotation not later than _____. Please note that quotation submitted beyond the deadline given above, will not be considered.	TERMS: * <input checked="" type="checkbox"/> Payment: _____ <i>days</i> * <input checked="" type="checkbox"/> Delivery: _____ <i>calendar days</i>
DELIVERY POINT: <p style="text-align: center;">PPMD RECEIVING SECTION</p> <p style="text-align: center;">Bldg 709, Burgos Street, Subic Bay Freeport Zone</p> If FOB destination or others, pls. indicate the estimated freight cost.	TO SUPPLIER: IS YOUR PRICE QUOTATION EXCLUSIVE OF VAT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

ITEM NO	ITEM DESCRIPTION	QTY	UI	BRAND / WARRANTY	UNIT PRICE	TOTAL PRICE
	SERVICES: NEWSPAPER SUBSCRIPTION FROM CY 2023	1	LO *	_____	_____	_____
1	PHILIPPINE DAILY INQUIRER (MONDAY - SUNDAY)	614	IS *	_____	_____	_____
2	PHILIPPINE DAILY INQUIRER (MONDAY - FRIDAY)	3,497	IS *	_____	_____	_____
3	MANILA BULLETIN (MONDAY - SUNDAY)	249	IS *	_____	_____	_____
4	MANILA BULLETIN (MONDAY - FRIDAY)	747	IS *	_____	_____	_____
5	PHILIPPINE STAR (MONDAY - SUNDAY)	249	IS *	_____	_____	_____
6	PHILIPPINE STAR (MONDAY - SATURDAY)	312	IS *	_____	_____	_____
7	PHILIPPINE STAR (MONDAY - FRIDAY)	2,988	IS *	_____	_____	_____
8	THE MANILA TIMES (MONDAY - SUNDAY)	498	IS *	_____	_____	_____
9	MANILA STANDARD (MONDAY - SUNDAY)	249	IS *	_____	_____	_____
10	BUSINESS MIRROR (MONDAY - SUNDAY)	249	IS *	_____	_____	_____
11	DAILY TRIBUNE (MONDAY - SUNDAY)	249	IS *	_____	_____	_____

NOTE:
 PROGRESSIVE BILLING ONLY ACTUAL DELIVERIES WILL BE PAID BY SBMA

<input checked="" type="checkbox"/> * COMPANY NAME: _____ <input checked="" type="checkbox"/> * MAILING ADDRESS: _____ <input checked="" type="checkbox"/> * TEL NO.: _____ <input checked="" type="checkbox"/> FAX NO.: _____ <input checked="" type="checkbox"/> E-MAIL ADD: _____	* GRAND TOTAL: _____
CERTIFICATION: I hereby certify that I have personally quoted the price/s of the item/s mentioned above and further attest that the validity is 30 working days upon signing, unless otherwise stated herein. We acknowledge that our failure to indicate that the aforementioned bid amount is exclusive of VAT shall result to a presumption that the bid amount is inclusive of VAT and other taxes.	CERTIFICATION: I hereby certify that I have personally canvassed/verified the price/s of the item/s mentioned above.
<input checked="" type="checkbox"/> _____ * Signature over printed name Date Designation (Authorized Company Personnel)	_____ Signature over printed name Date (Canvasser)
Opened by: _____ Witnesses: _____ _____ _____ Date: _____	

IMPORTANT NOTICE TO SUPPLIER/CONTRACTOR: Please answer all required data marked with *. Under RA 7227, SBMA is exempted from VAT.

