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Bid Notice Abstract

Request for Quotation (RFQ)

Reference Number 10041684
Procuring Entity CARLOS HILADO MEMORIAL STATE UNIVERSITY
Title Procurement of Food, Accommodation and Venue for the Conduct of Batch 1 Training OPN Navigating Education from Higher Ground Through Whole-Brain Self-Mastery and Mindfulness Practice on August 23-25,
Area of Delivery Negros Occidental

Solicitation Number:	RFQ 23-356	Status	Pending
Trade Agreement:	Implementing Rules and Regulations	Associated Components	1
Procurement Mode:	Negotiated Procurement - Small Value Procurement (Sec. 53.9)	Bid Supplements	0
Classification:	Goods	Document Request List	0
Category:	Travel, Food, Lodging and Entertainment Services	Date Published	15/08/2023
Approved Budget for the Contract:	PHP 641,100.00	Last Updated / Time	14/08/2023 16:07 PM
Delivery Period:		Closing Date / Time	18/08/2023 09:00 AM
Client Agency:			
Contact Person:	Rowena De la Vida Prado Administrative Assistant II Mabini Street Talisay City Negros Occidental Philippines 6115 63-34-7120003 Ext.142 bac.sec@chmsu.edu.ph		

Description

Republic of the Philippines
 CARLOS HILADO MEMORIAL STATE UNIVERSITY
 Talisay City, Negros Occidental
 Telefax: (034) 712-8404 / 712-0003 Local 142
 bac.sec@chmsc.edu.ph

REQUEST FOR QUOTATION

Date: AUGUST 07, 2023
 Quotation No. 23-356

Please quote your lowest price on the item/s listed below, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than _____ in the return envelope attached herewith.

DR. ANDREW EUSEBIO S.TAN
 BAC Chairman

NOTE:

1. ALL ENTRIES MUST BE TYPEWRITTEN
2. DELIVERY PERIOD WITHIN _____ CALENDAR DAYS
3. WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPPLIES & MATERIALS, ONE (1) YEAR FOR

EQUIPMENT, FROM DATE OF ACCEPTANCE BY THE PROCURING ENTITY

- 4. PRICE VALIDITY SHALL BE FOR A PERIOD OF _____ CALENDAR DAYS
- 5. G-EPS REGISTRATION CERTIFICATE SHALL BE ATTACHED UPON SUBMISSION OF THE QUOTATION
- 6. BIDDERS SHALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATIONS OF THE PRODUCT BEING OFFERED

ITEM ITEM & DESCRIPTION QTY. UNIT UNIT PRICE TOTAL PRICE
 NO. (Pls. indicate brand offered)

1 LEASE OF VENUE (INCLUDING FOOD AND ACCOMODATION) 105 pax

* FOOD

Day 1

AM SNACKS (upon arrival), Assisted Buffet Breakfast, Buffet Lunch,
 PM Snacks, Assisted Buffet Dinner

Day 2

AM SNACKS , Assisted Buffet Breakfast, Buffet Lunch,
 PM Snacks, Assisted Buffet Dinner

Day 3

AM Snacks, Assisted Buffet Breakfast, Buffet Lunch

TOTAL

*****Nothing Follows*****

TOTAL ABC = Php 641,100.00

PROCUREMENT OF FOOD AND ACCOMODATION FOR THE CONDUCT OF BATCH 1 TRAINING OPN NAVIGATING
 EDUCATION FROM HIGHER GROUND THROUGH WHOLE-BRAIN SELF-MASTERY AND MINDFULNESS PRACTICE ON
 AUGUST 23-25, 2023- TALISAY/A. CALFOFORO

PR# 23-402-0807 08-07-23

INCOME 256-164-23-08 08-07-23

Line Items

Item No.	Product/Service Name	Description	Quantity	UOM	Budget (PHP)
1	Food, Accommodation and Venue	* FOOD Day 1 AM SNACKS (upon arrival), Assisted Buffet Breakfast, Buffet Lunch, PM Snacks, Assisted Buffet Dinner Day 2 AM SNACKS , Assisted Buffet Breakfast, Buffet Lunch, PM Snacks, Assisted Buffet Dinner	105	Pack	641,100.00

Created by Rowena De la Vida Prado

Date Created 14/08/2023

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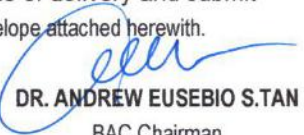


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ITEM NO.	ITEM & DESCRIPTION (Pls. indicate brand offered)	QTY.	UNIT	UNIT PRICE	TOTAL PRICE
1	LEASE OF VENUE (INCLUDING FOOD AND ACCOMODATION)	105	pax		
	* FOOD				
	Day 1				
	AM SNACKS (upon arrival), Assisted Buffet Breakfast, Buffet Lunch, PM Snacks, Assisted Buffet Dinner				
	Day 2				
	AM SNACKS , Assisted Buffet Breakfast, Buffet Lunch, PM Snacks, Assisted Buffet Dinner				
	Day 3				
	AM Snacks, Assisted Buffet Breakfast, Buffet Lunch				
	TOTAL				
	*****Nothing Follows*****				
	TOTAL ABC = Php 641,100.00				
	PROCUREMENT OF FOOD AND ACCOMODATION FOR THE CONDUCT OF BATCH 1 TRAINING OPN NAVIGATING EDUCATION FROM HIGHER GROUND THROUGH WHOLE-BRAIN SELFG-MASTERY AND MINDFULNESS PRACTICE ON AUGUST 23-25,2023- TALISAY/A. CALFOFORO				
	PR# 23-402-0807 08-07-23				
	INCOME 256-164-23-08 08-07-23				

Released (BAC) _____ Date _____ By _____
 Returned (Supplier) _____

 Printed Name/Signature

 Tel. No./Cellphone No.

 Date