



## Bid Notice Abstract

### Request for Quotation (RFQ)

**Reference Number** 12575241  
**Procuring Entity** CARLOS HILADO MEMORIAL STATE UNIVERSITY  
**Title** Procurement of Food, Venue and Accommodation for the Conduct of Year-End Evaluation and Team Development on November 27-28, 2025  
**Area of Delivery** Negros Occidental

<b>Solicitation Number:</b>	RFQ 25-594	<b>Status</b>	Pending
<b>Trade Agreement:</b>	Implementing Rules and Regulations	<b>Associated Components</b>	1
<b>Procurement Mode:</b>	Negotiated Procurement - Small Value Procurement (Sec. 53.9)	<b>Bid Supplements</b>	0
<b>Classification:</b>	Goods	<b>Document Request List</b>	0
<b>Category:</b>	Travel, Food, Lodging and Entertainment Services	<b>Date Published</b>	12/11/2025
<b>Approved Budget for the Contract:</b>	PHP 120,400.00	<b>Last Updated / Time</b>	11/11/2025 16:35 PM
<b>Delivery Period:</b>		<b>Closing Date / Time</b>	17/11/2025 09:00 AM
<b>Client Agency:</b>			
<b>Contact Person:</b>	Rowena De la Vida Prado Administrative Assistant II Mabini Street Talisay City Negros Occidental Philippines 6115 63-34-7120005 Ext.142 63-939-9296624 bac.sec@chmsu.edu.ph		

#### Description

Republic of the Philippines  
 CARLOS HILADO MEMORIAL STATE UNIVERSITY  
 Talisay City, Negros Occidental  
 Mobile Phone Number: (0920) 583 3086  
 bac.sec@chmsu.edu.ph

#### REQUEST FOR QUOTATION

Date: NOVEMBER 11, 2025  
 Quotation No.: 25-594

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. MA. RIZA T. MANALO  
 BAC Chairperson

#### 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

11/11/25, 4:37 PM

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 FOOD, VENUE AND ACCOMMODATION ON 1 lot  
 NOVEMBER 27-28, 2025 FOR 40 PAX

Day 1: November 27, 2025

- AM/PM Snacks, Lunch and Dinner

Day 2: November 28, 2025

- Breakfast, AM/PM Snacks, Lunch

Inclusions:

Function Hall with sound and Microphones

Room Accommodation for 40 pax (room sharing)

TOTAL

\*\*\*\*\*Nothing Follows\*\*\*\*\*

TOTAL ABC = Php 120,400.00

PROCUREMENT OF FOOD, VENUE AND ACCOMMODATION FOR THE CONDUCT OF YEAR-END EVALUATION AND TEAM

DEVELOPMENT/S. JUANCE (SAO- Admin)

PR# 25-1171-1103 11-03-25

INCOME 779-164-25-11 11-06-25

#### Line Items

Item No.	Product/Service Name	Description	Quantity UOM		Budget (PHP)
1	Food, Venue and Accommodation	NOVEMBER 27-28, 2025 FOR 40 PAX Day 1: November 27, 2025 - AM/PM Snacks, Lunch and Dinner Day 2: November 28, 2025 - Breakfast, AM/PM Snacks, Lunch Inclusions: Function Hall with sound and Microphones Room Ac	1	Lot	120,400.00

Created by

Rowena De la Vida Prado

Date Created

11/11/2025

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ITEM NO.	ITEM & DESCRIPTION (Pls. indicate brand offered)	QTY.	UNIT	UNIT PRICE	TOTAL PRICE
1	<b>FOOD, VENUE AND ACCOMMODATION ON</b>	1	lot		
	<b>NOVEMBER 27-28, 2025 FOR 40 PAX</b>				
	Day 1: November 27, 2025				
	- AM/PM Snacks, Lunch and Dinner				
	Day 2: November 28, 2025				
	- Breakfast, AM/PM Snacks, Lunch				
	<i>Inclusions:</i>				
	Function Hall with sound and Microphones				
	Room Accommodation for 40 pax (room sharing)				
	<b>TOTAL</b>				
	<b>*****Nothing Follows*****</b>				
	<b>TOTAL ABC = Php 120,400.00</b>				
	<b>PROCUREMENT OF FOOD, VENUE AND ACCOMMODATION FOR THE CONDUCT OF YEAR-END EVALUATION AND TEAM DEVELOPMENT/S. JUANCE (SAO- Admin)</b>				
	PR# 25-1171-1103 11-03-25				
	INCOME 779-164-25-11 11-06-25				

Released (BAC) \_\_\_\_\_ Date \_\_\_\_\_ By \_\_\_\_\_  
Returned (Supplier) \_\_\_\_\_

Printed Name/Signature \_\_\_\_\_  
Tel. No./Cellphone No. \_\_\_\_\_  
Date \_\_\_\_\_