



REQUEST FOR QUOTATION FOR THE PROCUREMENT OF GOODS AND SERVICES

****Mandatory to fill in****

COMPANY NAME:	Quotation No. 21-250-07
ADDRESS:	Purchase Request No. F-2021-07-0182
CONTACT No.	Purpose: For the use of staff in the implementation of DOST-PCIEERD IMPACT Program for BulSU
TIN No.	ABC: 50,000.00
PhilGEPS Registration No.	Delivery Period: 7 Calendar Days upon receipt of Purchase Order
EMAIL ADDRESS:	

INSTRUCTIONS TO SUPPLIERS:

1. Please quote your lowest price on the item/s listed below comprising the necessary taxes.
2. It is mandatory to indicate the brand and/or model of the items being offered and to attach a brochure thereof whenever applicable
3. Indicate the warranty period in cases of equipment or whenever applicable.
4. Forthwith submit the accomplished quotation duly signed by your representative.
5. Suppliers are required and mandated to attach and submit the following documentary requirements:
a) Valid Mayor's/ Business Permit; b) BIR Certificate of Registration; c) Authority to Print Receipt; d) DTI/SEC Registration; e) PhilGEPS Membership Certificate; and f) PCAB License in cases of Infrastructure projects.
6. All items must conform with the internationally accepted standard and sub-standard items shall not be accepted.

ITEM NO.	ITEM & SPECIFICATION	QTY/UNIT	BRAND & MODEL OFFERED	UNIT PRICE	TOTAL PRICE
1	Printer with extra toner Digital Copier with Network Printing, Color Scanning and Network Fax Copy and Print speed of 40 copies per minute Original size is form A6 up to legal Built-in Duplex copying / printing (Back to Back) Copy and Scan Resolution of 600 x 600 dpi Built-in Document Processor up to 50 sheets capacity Dual Scan Document Processor supporting A6 originals Scan File format of PDF (High Compression, PDF/A-1), TIFF, JPEG, XPS Compatible with Windows, Macintosh, Linux, Unix Power Consumption copying/printing: 661W, sleep mode; 1W USB Memory Printing and Scanning	1unit			
	Please attach brochure or sample picture of the said item/s				

Accomplished by:

By the authority of the University President.

 Supplier's Representative
 (Print name and Signature)

DR. DOLLY P. MAROMA
 BAC Chairman

Date Accomplished : _____

Canvassed by:

 Name and Signature