



**REQUEST FOR QUOTATION FOR THE PROCUREMENT OF GOODS AND SERVICES**

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

COMPANY NAME:	Quotation No. 21-441-11
ADDRESS:	Purchase Request No. G-2021-11-0727
CONTACT No.	Purpose: For Accreditation
TIN No.	ABC: 190,800.00
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
<b>1</b>	<b>1080p Web Camera (Auto Focus)</b>	<b>43 unit</b>			
	Resolution: 1080p FHD				
	Camera: 3 MP (or higher)				
	Focus Type: Auto Focus				
	Frame Rate: 30fps (or higher)				
	Lens Type: Glass				
	Built-in mic: Yes (Stereo)				
	Interface: USB - A				
	System Requirements: Windows 7 /8 / 8.1 / 10 or later, Mac OS 10.6 or later				
	Warranty: 2 years manufacturer's warranty				
<b>2</b>	<b>2 TB External Hard Disk Drive (Slim)</b>	<b>4 unit</b>			
	Capacity: 2TB				
	Interface: USB 3.0				
	System Requirements: Windows 7 /8 / 8.1 / 10 or later, Mac OS 10.6 or later				
	Warranty: Minimum of 1 year manufacturer's warranty				
	<b>Note: Please attach brochure or sample picture if any</b>				

Accomplished by: \_\_\_\_\_  
 Supplier's Representative  
 (Print name and Signature)

By the authority of the University President.  
  
**DR. DOLLY P. MAROMA**  
 BAC Chairman

Date Accomplished : \_\_\_\_\_

Canvassed by: \_\_\_\_\_  
 Name and Signature