| ${ }^{* *}$ Mandatory to fill $\mathrm{in} * *$ |  |
| :--- | :--- |
| COMPANY NAME: | Quotation No. 22-08-538 |
| CONTACT No. | Purchase Request No. G-2022-08-0770 |
| Address: | Purpose: For additional convenience outlet \& aircon power <br> supply |
| TIN No. | ABC: 24,975.00 |
| PhilGEPS Registration No. | Delivery Period: 7 Calendar Days upon receipt of Purchase <br> 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; and d) PhilGEPS Membership Certificate
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 | 5.5 mm 2 THHN Permalyte Type | 50 mtrs |  |  |  |
| 2 | 3.5 mm 2 THHN Permalyte Type | 50 mtrs |  |  |  |
| 3 | Universal Outlet w/ lock screw (C.O) | 24 pcs |  |  |  |
| 4 | 2gang Plate Cover Plastic Type Classic | 12 pcs |  |  |  |
| 5 | Black Screw 1" | 100 pcs |  |  |  |
| 6 | Amco Box Plastic Type | 12 pcs |  |  |  |
| 7 | Plastic Molding 1"x8 | 7 pcs |  |  |  |
| 8 | Nema 1 Bolt-on | 1 pc |  |  |  |
| 9 | 30 ampers Circuit Breaker Bolt-on | 2 pcs |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  | BY LOT |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Accomplished by:

By the authority of the University President.
DR. DOLLYP. MAROMA
BAC Chairman
Canvassed by:

Supplier's Representative
(Print name and Signature)
$\qquad$
-

