



REQUEST FOR QUOTATION FOR THE PROCUREMENT OF GOODS AND SERVICES

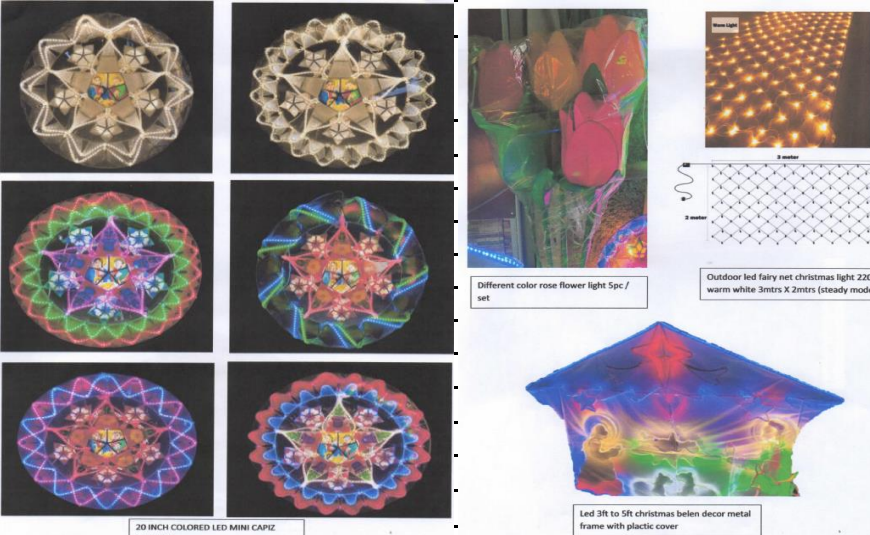
Mandatory to fill in

COMPANY NAME:	Quotation No. 22-09-597
CONTACT No.	Purchase Request No. G-2022-09-0835
Address:	Purpose: For the christmas decoration for main gate.
TIN No.	ABC: 97,500.00
PhilGEPS Registration No.	Delivery Period: 7 Calendar Days upon receipt of Purchase Order
EMAIL ADDRESS:	

INSTRUCTIONS TO SUPPLIERS:

- Please quote your lowest price on the item/s listed below comprising the necessary taxes.
- It is mandatory to indicate the brand and/or model of the items being offered and to attach a brochure thereof whenever applicable
- Indicate the warranty period in cases of equipment or whenever applicable.
- Forthwith submit the accomplished quotation duly signed by your representative.
- 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) PhilGEPS Membership Certificate and e) Omnibus Sworn Statement
- 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	20 INCH COLORED LED MINI CAPIZ LANTERN (Different color and design)	30 units			
2	Different color rose flower light 5pc / set	15 sets			
3	outdoor led strip/roop light 50mtrs warm white 220v with connector/driver w/out any control (steady mode) cuttable	8 rolls			
4	led strip/roof light connector 220v w/o any control (steady mode) fitted in to strip/roof light (item #3)	25 pcs			
5	Outdoor led fairy net christmas light 220v warm white 3mtrs X 2mtrs (steady mode)	20 sets			
6	Cable tie 6"- 8" 100pcs / pack	20 packs			
7	Led 3ft to 5ft christmas belen decor metal frame with plactic cover	1 unit			
	note: please see attached photo for additional reference. Reference only. supplier must provide sample photo or actual sample				
	BY LOT				
	NOTE: Please attach brochure and indicate days of delivery				



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