



REQUEST FOR QUOTATION FOR THE PROCUREMENT OF GOODS AND SERVICES

Mandatory to fill in

COMPANY NAME:	Quotation No. 23-06-346
CONTACT No.	Purchase Request No. G-2023-06-0510
Address:	Purpose: For CICT TV Standby Project
TIN No.	ABC: 4,500.00
PhilGEPS Registration No.	Please indicate days of delivery: _____ 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; 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	Caster wheel (Heavy Duty) set of 4pcs	10 set			
	Caster wheel Soft Rubber Swivel Caster for				
	Platform trolley with Brakes (Black 2" wheel dia)				
					
	NOTE: Please attach brochure and indicate days of delivery				

Accomplished by:

Supplier's Representative
(Print name and Signature)

Date Accomplished : _____

By the authority of the University President.

DR. DOLLY P. MAROMA
BAC Chairman

Canvassed by:

Name and Signature