

Republic of the Philippines BULACAN STATE UNIVERSITY City of Malolos, Bulacan

REQUEST FOR QUOTATION FOR THE PRO	OCUREMENT OF GOODS AND SERVICES			
Mandatory to fill in				
COMPANY NAME:	Quotation No. 23-07-353			
CONTACT No.	Purchase Request No. G-2023-07-0526			
Address:	Purpose: Implementation of ESO BUHAI Program			
TIN No.	ABC: 84,510.00			
PhilGEPS Registration No.	Please indicate days of delivery: Calendar Days			
EMAIL ADDRESS:	upon receipt of Purchase Order			
INSTRUCTIONS TO SUPPLIERS:				
1. Please quote your lowest price on the item/s listed below compri s	ing the necessary taxes.			
2. It is mandatory to indicate the brand and / or model of the items b whenever applicable	eing offered and to attach a brochure thereof			
3. Indicate the warranty period in cases of equipment or whenever a	pplicable.			
4. Forthwith submit the accomplished quotation duly signed by you	r representative.			
5. Suppliers are required and mandated to attach and submit the follo	owing 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 S	Statement			

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	Hygiene Kit (3pcs towel, toothbrush, toothpaste, soap, deodorant) with bag	150 set			
2	Face towels, white	30 pc			
3	Bath soap (medium), with fragrance, belongs to top 3 brand	30 pc			
4	Hair brush /comb	30 pc			
5	Shampoo (sachet), belongs to top 3 brand , 15ml	60 pc			
6	Toothbrush	30 pc			
7	Toothpaste (25 g)	30 tubes			
8	Sanitary Pads (8 pc/pack)	30 pck			
9	Nail clippers / Cutters	30 pc			
10	Tissue (roll), small	30 Roll			
11	Bar / detergent soap grass, belongs to top 3 brand , 130g	5 pc			
	BY LOT				
	NOTE: Please attach brochure and indicate days				
	of delivery				

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Accomplished by:					
		By the authority of the Universit	the authority of the University President.		
	_	PP P0	afm		
Supplier's Representative		DR. DOLLY P. MAROMA			
(Print name and Signature)		BAC Chairman			
Date Accomplished :		Canvassed by:			
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		Name and Signature			
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Revision: 1					
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