



REQUEST FOR QUOTATION

(Goods & Services)

Company Name/TIN: _____
 Business Address: _____

Date: Feb. 09, 2024
 PR No: 2024-01-0042

Please quote your lowest price on the item/s listed below, subject to the terms and conditions stipulated, and submit your quotation duly signed by your representative not later than **February 12, 2024; 05:00 P.M.** in the return envelope to the BAC Secretariat, DSSC, Matti, Digos City, or email to psu@dssc.edu.ph.

TERMS AND CONDITIONS:

1. **Delivery period:** 30 Calendar days from receipt of Purchase Order.
2. **Warranty:** 3 months for supplies & materials; 1 year for equipment from date of acceptance by the Procuring Entity.
3. **Price validity:** 120 calendar days
4. **Documentary requirements:** PhilGEPS Reg. Number, Mayor's Permit, SEC/DTI Cert., BIR Cert. of Reg., Omnibus Sworn Statement, & Income/Business Tax Return (For ABCs above P500K)
5. The Approved Budget for the Contract for this procurement is, **61,500.00**


RACHEL R. YONTING
 Procurement Service Unit Head/BAC Secretariat

Item No.	Qty.	Unit	Item Description	Brand/Make	ABC per Item	Unit Cost	Total Cost	
1	1	Unit	Multimedia projector		27,300.00			
			*4,000 ANSI Lumens					
			*5,000 Lamp Hours					
2	1	Unit	Printer		16,200.00			
			*Inkjet					
			*Print, Scan, Copy					
			*Wired & Wireless Printing					
			*Duplex Printing					
			*Auto Document Feeder					
			*435x380x195mm					
3	1	Pc	Steel Filing Cabinet		18,000.00			
			Specs: 5 layer Steel Shelf Cabinet with Sliding Glass Doors-Lockable					
			Steel Doors with Duplicate Keys, Adjustable Shelf Height, Powdered Coated Finish, Heavy Duty Commercial Grade					
GRAND TOTAL:								



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Delivery Period: _____
Warranty : _____
Price Validity : _____

After having carefully read and accepted your General Conditions, I/We quote you on the item/s at prices noted above. If the space for delivery period, warranty, and price validity are left blank, it means that I/ We concur with the terms and conditions specified by the Davao del Sur State College (DSSC).

Canvasser

Printed Name and Signature

Contact Details:

Landline: _____

Mobile No. _____

E-mail address: _____

Date signed: _____