



Republic of the Philippines
CENTRAL MINDANAO UNIVERSITY
 University Town, Musuan, Bukidnon

Name of Procuring Entry:	CENTRAL MINDANAO UNIVERSITY	Request for Quotation (P. R. No.):	
Revised on:	REVISED ON	Date:	May 2, 2019
Standard Form / Title:	REQUEST FOR QUOTATION	Office/End-User:	
COMPANY NAME:			
ADDRESS:			
TEL. NO./FAX NO.:		TIN:	

Please quote your lowest price on the item(s) listed below, subject to the Terms and Conditions stated below and submit your quotation duly signed by your representative not later than 10:00 a.m. of _____ in the return envelope attached, to the BAC Secretariat for Goods, CENTRAL MINDANAO UNIVERSITY, University Town, Musuan, Bukidnon.

TERMS and CONDITIONS:

1. All entries must be typewritten or legibly written.
 2. Delivery period within **15 days** upon receipt of the approved funded Purchase Order (P.O.)
Administrative penalties pursuant to Sec. 69 of the Revised IRR-RA 9184 shall be imposed for non-delivery without valid reason.
 3. Warranty shall be for a minimum of three (3) months for supplies and materials; one year for Equipment; 3 years IT Equipment from date of acceptance by the end-user.
 4. Price validity shall be for a period of sixty (60) calendar days.
 5. a) DTI business name/ SEC registration of supplier, b) Latest **income and business tax returns duly stamped and received by the BIR** and duly validated with the tax payments made thereon, c) **Tax Clearance** from the BIR to prove and timely payment of taxes, d) **Certificate of PHILGEPS registration**, e) Latest **Mayor's/Business permit** shall be attached upon submission of the quotation.
 6. Bidders shall submit original brochures of the product.
 7. Please indicate the brand for each items being offered.
 8. The approved budget ceiling for this procurement is **₱ 960,000.00**

ITEM NO.	ITEMS & DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	TOTAL PRICE
1	CBC				
2	Urinalysis				
3	X-Ray (Chest PA)				
4	Drug Test				
TOTAL AMOUNT:					

Note: The awarding for this RFO will be on lump-sum basis. Prospective Suppliers must quote for all of the items. Otherwise they will be subjected for disqualification.

Purpose: _____

Brand and Model : _____ Warranty : _____
 Delivery Period/Term : _____ Price Validity : _____

After having carefully read and accepted your General Conditions, I/We quote you on the item(s) at prices note above. If the space for Delivery Period, Warranty and Price Validity are left blank, it means that I concur with the Terms and Conditions specified by CMU Bids and Awards Committee.

BAC- Secretariat:
 Email: bac@cmu.edu.ph

 Printed Name/ Signature/Date

 Tel. No./ Mobile No./ E-mail Address