

## OFFICE OF THE BIDS AND AWARDS COMMITTEE

| Name of Procuring Entry: | CENTRAL MINDANAO UNIVERSITY | Request for Quotation (P. R. No.): |            | GF (NP-SMALL VALUE)- 45 |
|--------------------------|-----------------------------|------------------------------------|------------|-------------------------|
| Revised on:              |                             |                                    |            |                         |
| Standard Form / Title:   | REQUEST FOR QUOTATION       | Office/End-User:                   | MD CONDINO |                         |
| 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 02:00 p.m. of \_\_\_\_\_\_ in the return envelope attached, to the BAC Secretariat, CENTRAL MINDANAO UNIVERSITY, University Town, Musuan, Bukidnon.

## **TERMS and CONDITIONS:**

- 1. All entries must be typewritten or legibly written.
- Delivery period within 30 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. Negotiated Procurement (Small Value):
  - 1. Mayor's/ Business Permit
  - 2. Philgeps Registration
- 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 \$\mathbf{P}\$198,000.00

HERMIE P. PAVA
BAC Chairperson for
Goods and Services

| ITEM NO.                                     | ITEMS & DESCRIPTION  | QUANTITY                     | UNIT                                 | UNIT<br>PRICE   | TOTAL<br>PRICE |
|--|--|------------------------------|--------------------------------------|-----------------|----------------|
| 1  | Plaque for guest speakers  | 10                           | piece                                |                 |                |
| 2  | Plaque for student awardees  | 15                           | piece                                |                 |                |
| 3  | Plaque for topnotchers   | 10                           | piece                                |                 |                |
| 4  | Plaque for Outstanding Faculty   | 4                            | piece                                |                 |                |
| 5  | Customized Medals  | 1000                         | piece                                |                 |                |
|  | TOTAL AMOUNT:  |                              |                                      |                 |                |
| Note: The awarding for this                  | s RFQ will be on PER ITEM basis.   |                              |                                      |                 |                |
| Purpose:                                     | For the 2024 University Recognition  |                              |                                      |                 |                |
| Delivery Period/Term :  After having careful | ly read and accepted your General C<br>d, Warranty and Price Validity are le<br>wards Committee. | Price Validity :             |                                      | em(s) at prices |                |
| NICOLE ANGELO P. F.                          |  | Printed Name/ Signature/Date |                                      |                 |                |
|  |  | Tel. No./                    | Tel. No./ Mobile No./ E-mail Address |                 |                |