

OFFICE OF THE BIDS AND AWARDS COMMITTEE

Name of Procuring Entry:

CENTRAL MINDANAO

	Revised on:							
Standard Form / Title:		REQUEST FOR QUOTATION	Office/End-User:	G. BARBOSA				
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 01:00 p.m. of in the return envelope attached, to the BAC Secretariat, CENTRAL MINDANAO UNIVERSITY, University Town, Musuan, Bukidnon. TERMS and CONDITIONS:							
	 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. Warranty shall be for a minimum of three (3) months for supplies and materials; one year for Equipment; years IT Equipment from date of acceptance by the end-user. 					HERMIE P. PAVA BAC Chairperson for		
	4. Price validity shall be for a period of sixty (60) calendar days.					Goods and Services		
	5. Negotiated Procurement (Small Value) (above 50,000.00) 1. Mayor's/ Business Permit 2. Philgeps Registration 3. Omnibus Sworn Statement 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 140,000.00							
ITEM	ITEMS 9 DEC	PURTION	QUANTITY	UNIT	UNIT COST	UNIT	TOTAL PRICE	
NO.	ITEMS & DESC	CRIPTION	QUANTITY	UNII	(ABC)	PRICE	TOTAL PRICE	
1	1.5 HP Non-Inverted mounted type, 2-wasilent mode aircond with installation	ay draining,	2	unit	40,000.00			
2	2.5 HP Non-Inverted and Wall-mounted type, 2-way draining, silent mode airconditioning unit with installation		1	unit	60,000.00			
		OTAL AMOUNT:						
Note: The awarding for this RFO will be on Per-Item basis.								
Purpose: for CNPRDE Use								
	Brand and Model :			Warranty :				
	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.							
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	Printed Name/ Signature/Date							
	NICOLE ANGELO P. RICABLANCA							
							_	
	Guirvassor			Tel. No./ Mobile No./ E-mail Address				

Request for Quotation (P. R. No.):

STF (NP-SMALL VALUE)- 370