

UNIVERSITY OF THE PHILIPPINES
UP Open university
Los Baños, Laguna

Request for Quotation
Supply and Property Management Office

Date October 5, 2016
RFQ No.: _____

Please quote your lowest price on the item/s listed below, subject to the General Conditions on the last page, starting the shortest time of delivery and submit your Quotation duly signed by your representative not later than ____ October, 2016 in the return Envelope attached herewith.

Note: 1. All entries must be typewritten

2. Delivery period within 7 calendar days

3. Warranty shall be for a period of six (6) months for supplies and materials, one (1) year for equipment, from the date of acceptance by the procuring entity

4. Price validity shall be for a period of 90 calendar days

5. PhilGEPS Registration Certificate shall be attached upon submission of the quotation

6. Bidders shall submit original brochures showing certifications of the product being offered.

7. Others: _____

RFQ for PR 617 Purchase of 1 unit multifunction inkjet printer

CODE	ITEM NO.	QUANTITY	UOM	GENERAL DESCRIPTION	ABC	QUOTATION	
						FIGURES	WORDS
1		1	unit	Multifunction Inkjet Printer	PHP14,000.00		
				Printing type: Colour			
				Printing Technology: Inkjet			
				Scanner Type: Flatbed			
				Print Resolution: 600x600 DPI			
				Print Speed Risk Black: 33PPM			
				Print Speed Colour: 15 PPM			
				Scanning Method: CIS			
				Network: Ethernet, USB, WiFi			
				Modem Speed: 33.6 kbps			
				Color: Black			
				Paper Tray: 100 sheets			
				Printer Type: Multifunction			
TOTAL					PHP14,000.00		

Please quote at your government price (Zero-Rated VAT) and state that the time within which you can make delivery. It will be appreciated if we can have your quotation in the office as soon as possible or on or before the deadline stated herein.


Pura S.V. Amoloza
Chief AO, SPMO

After having carefully read and accepted your General Conditions, I/We quote you on the Item at prices noted above.

Name of the Company: _____

Address: _____

Name of Representative: _____

Position: _____

Signature: _____

Tel. No. : _____

Fax No. : _____

Email: _____

Address: _____

Date: _____