



UNIVERSITY OF THE PHILIPPINES
LOS BAÑOS
Los Baños, IV-A
VAT Reg. TIN: 000-864-006-00004

UPLB BAC SECRETARIAT

BY: 1 DATE: 4-5-22

APR 13 2022 - 5PM

UPLB RO 4-119-22-RES
DEADLINE OF SUBMISSION

Suppliers Name: _____

Date: February 10, 2022
Fund Code: N925728
MOP: SHOPPING
Contact No: 9063619234/ mgatienza@up.edu.ph
Contact Person: Mark Lawrence Atienza

Please quote your lowest price on the item/s listed below, subject to the General Conditions below.

Note:

- Bidders shall provide correct and accurate information required in this form. All entries must be typewritten or in print and properly accomplished. Do not leave blank entries, put N/A for not applicable.
- Price quotation/s to be denominated in Philippine Peso shall include all taxes, duties, and/or levies payable.
- Bidders must indicate the BRAND and MODEL NUMBER for equipment and its accessories or peripherals. Evidence shall be in the form of manufacturer's un-amended sale literature, unconditional
- Quotation through fax/email is acceptable. Winning bidder shall submit original signed RQ before issuance of Purchase order (P.O.).
- Quotations exceeding the Approved Budget for Contract shall be rejected.
- Documentary requirements per Memorandum No. 03 Series of 2017 shall be attached upon submission of the quotation
- Others: _____

ITEM No.	GENERAL NAME OF THE ITEM	REQUIRED SPECIFICATIONS	UNIT OF MEASURE	QTY	ESTIMATED UNIT APPROVED BUDGET OF THE	ESTIMATED TOTAL APPROVED BUDGET OF THE	OFFERED SPECIFICATION Suppliers	QUOTED UNIT PRICE	TOTAL QUOTED PRICE	EVALUATION (Leave this space)
1	FTA cards	FTA classic card for genomic sample storage 4 sample areas per card, 125 µL maximum volume/sample area, 500 µL maximum total volume/card, pkg of 100pcs and pkg of 25pcs	box	1	70,000.00	70,000.00				
2	FTA puncher	2.0 mm, pack of 4 ea (plus 2 cutting mats) can be autoclaved at 250°C for limited re-use.	pcs	2	10,000.00	20,000.00				
3	Syringes (3ml)	Disposable syringe 3cc 23g x 1" Single Use Non-Toxic Non-Pyrogenic With needle luer lock (100pcs)	box	25	500.00	12,500.00				
4	Syringes (5ml)	Disposable syringe 5cc 23g x 1" Single Use Non-Toxic Non-Pyrogenic With needle luer lock (100pcs)	box	25	500.00	12,500.00				
TOTAL ABC					115,000.00					
							TOTAL QUOTED AMOUNT IN WORDS: ONE HUNDRED FIFTEEN THOUSAND PESOS			

Reviewed and Checked By:

Mark Lawrence Atienza
BAC TWG

Please quote at your government price (including 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.

BUYER/ END-USER

TERMS AND CONDITIONS:

- Price quotation/s shall be valid for a period of at least (30) calendar days from the date of submission.
- In order to assure that manufacturing defects shall be corrected by supplier, a warranty security shall be required from the contract awardee for a minimum period of three (3) months, in the case of EXPENDABLE SUPPLIES, or a
- Delivery period within _____ calendar days.
- Award of contract shall be made to the lowest quotation which complies with the technical specifications, and other terms and condition stated herein.
- UPLB reserves the right to reject any or all offers as may be considered most advantageous to the University.
- Any interlineations, erasure, or overwriting shall be valid only if they are signed or initialed by you or any of your duly authorized representative/s.

Requirements for Suppliers (GPPB Resolution No. 21-2017)

REQUIREMENTS	Shopping	Negotiated Procurement	Negotiated Procurement	Negotiated	Negotiated
1 Mayor's/Business Permit	/	/	/	/	/
2 PhilGEPS Registration Number	/	/	/	/	/
3 Professional license/ CV (consulting services)	/	/	/	/	/
4 PCAB License (for infrastructure)	/	/	/	/	/
5 Income / Business tax returns (except for government agencies as lessor)	/	/	/	/	/
6 Omnibus Sworn Statement	/	/	/	/	/
7 NFCC for infrastructure with ABC above Ph500k	/	/	/	/	/

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: _____
Signature over Printed _____
Position: _____

Tel. No.: _____
Fax No.: _____
Email Address: _____
Date: _____

