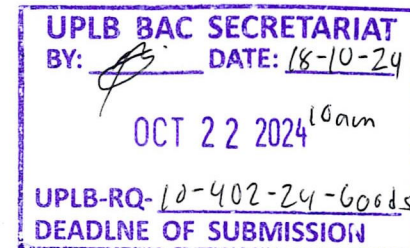


UNIVERSITY OF THE PHILIPPINES
LOS BANOS
 Los Banos, IV-A
 VAT Reg. TIN: 000-864-006-00004

Request for Quotation/Bid Form
UPLB Ugnayan ng Pahinungod

UPLB-RQ-_____



Supplier's Name: _____

| | |
|-----------------|---------------------------------------|
| Date: | October 4, 2024 |
| Fund Code: | 9375400 |
| MOP: | Small Value Procurement |
| Contact No.: | (049) 536-0505 / 0905-407-9655 |
| Contact Person: | RUTH O. CALILUNG |

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

PR: 174281

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 statement
- 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 SPECIFICA-TIONS | UNIT OF MEAS-URE | QTY. | ESTIMATED UNIT APPROVED BUDGET OF THE CONTRACT | ESTIMATED TOTAL APPROVED BUDGET OF THE CONTRACT | ORDERED SPECIFICA-TION | QUOTED UNIT PRICE | TOTAL QUOTED PRICE | EVALUA-TION |
|----------|--------------------------|--------------------------|------------------|------|--|---|---|-------------------|--------------------|---|
| | | | | | | | Suppliers must state here the detailed technical specifications of their offer against each of the individual parameters of | | | (Leave this space blank. For BAC/ Evaluators only.) |

| | | | | | | | each requirements | | | |
|---|-------------------|--|-----|---|-------------|-------------|-------------------|--|--|--|
| 1 | Printing Services | <p>READ Learning Module Paper Size: A4 (210 x 297 mm) Color: Colored (CMYK) per Type (Content): Typewriting Paper (White); 80 gsm Paper Type (Cover): 157 gsm matte or gloss paper wrapped on 3 mm board Number of pages (including front and back cover pages): 87 (Back-to-back print for content) Number of copies: 95</p> <p>READ Facilitator's Guide Paper Size: A4 (210 x 297 mm) Color: Colored (CMYK) per Type (Content): Typewriting Paper (White); 80 gsm Paper Type (Cover): 157 gsm matte or gloss paper wrapped on 3 mm board Number of pages (including front and back cover pages): 119 (Back-to-back print for content) Number of copies: 10</p> | lot | 1 | 100, 000.00 | 100, 000.00 | | | | |
| 2 | Printing Services | <p>Paper Size: A4 (210 x 297 mm) Color: Colored (CMYK) per Type (Content): Typewriting Paper (White); 80 gsm Paper Type (Cover): 157 gsm matte or gloss paper wrapped on 3 mm board Number of pages (including front and back cover pages): 87 (Back-to-back print for content) Number of copies: 90</p> <p>READ Facilitator's Guide Paper Size: A4 (210 x 297 mm) Color: Colored (CMYK) per Type (Content): Typewriting Paper (White); 80 gsm</p> | lot | 1 | 100, 000.00 | 100, 000.00 | | | | |

| | | | | | | | | | |
|------------------|--|--|--|--|--|--------------------|--------------------------------------|--|--|
| | | Paper Type (Cover): 157 gsm matte or gloss paper wrapped on 3 mm board Number of pages (including front and back cover pages): 119 (Back-to-back print for content) Number of copies: 10 | | | | | | | |
| TOTAL ABC | | | | | | 200, 000.00 | | | |
| | | | | | | | TOTAL QUOTED AMOUNT IN WORDS: | | |

Reviewed and Checked by


ANDREW P. LICARDO
 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


 RUTH O. CALILUNG

TERMS AND CONDITIONS:

1. Price quotation/s shall be valid for a period of at least (30) calendar days from the date of submission.
2. 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
3. Delivery period within 15 calendar days.
4. Award of contract shall be made to the lowest quotation which complies with the technical specifications, and other terms and conditions stated herein
5. UPLB reserves the right to reject any or all offers as may be considered most advantageous to the University.
6. Any interlineations, erasure, or overwriting shall be valid only if they are signed or initiated by you or any of your duly authorized representative/s.

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

| REQUIREMENTS | Shopping (Section 52) | Negotiated Procurement- Small Value Procurement (Section 53.9) | Negotiated Procurement- Lease of Real Property or Venue (Section 53.10) | Negotiated Procurement- Scientific, Scholarly or Artistic Work, Exclusive Technology and Media Services | Negotiated Procurement- Emergency (Section 53.2) |
|--------------|-----------------------------|---|--|---|--|
| | | | | | |

| | | | | (Section 53.6) | |
|---|---|------------------------|---|----------------|------------------------|
| 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) | | FOR ABCs ABOVE 500k | / | / | FOR ABCs ABOVE 50k |
| 6. Omnibus Sworn Statement | | FOR ABCs ABOVE 500k | | | FOR ABCs ABOVE 500k |
| 7. NFCC for Infrastructure with ABC above Ph500k | | / | | | FOR ABCs ABOVE 50k |

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

Name of the Company:

Tel No.:

Address:

Fax No.:

Email Address:

Date:

Signature over

Printed Name:

Position:
