

UNIVERSITY OF THE PHILIPPINES

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

Request for Quotation/ Bid Form (Technical Specifications) CAS-IBS

UPLE BAC SECRETARIAT BY: _______ DATE: 03-13-25 MAR 17 2025 100m UPLB-RQ- 03-074-25-60005 DEADLNE OF SUBMISSION

DEADLINE OF	
SUBMISSION:	

				-			
	Suppliers Name:	Date	Februar	y 27, 2025			
		Fund Code:	23:	21001			
		MOP:	Small Value	Procureme	ent		
		Contact No:	536-2893				
		Contact Perso	n Enrique D. Talag				
	Please quote your lowest price on the item.	listed below, subject to the Ger	eral Conditions below	Pat	(71137		
Note:		,,		η	1 11101		
	1. Bidders shall provide correct and accurate information required not applicable.	this form. All entries must be type	ewritten or in print and pro	perly accomp	olished. Do not	t leave blank entries, pu	t N/A for
	 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 of specification and compliance issued by the manufacturer and sample. 						
	4. Quotation through fax/email is acceptable. Winning bidder shall	ubmit original signed RQ before is	suance of Puchase order ((P,O.).			

ESTIMATED OFFERED SPECIFICATION ESTIMATED TOTAL APPROVED BUDGET OF THE **EVALUATION** ITEM GENERAL NAME OF UNIT APPROVED BUDGET OF THE CONTRACT Suppliers must state here the detailed chrical specifications of their offer agains each of the individual parameters of each requirements QUOTED UNIT TOTAL QUOTED Leave this space blank. For BACI REQUIRED SPECIFICATIONS OTY THE ITEM PRICE PRICE Evaluators only) CONTRACT Breakfast, Assisted (Arozcaldo with egg and chicken, Pandesal, Coffee, Bottled Catering Services 200 180.00 36,000.00 pax water, 500 ml), IBS Founding Anniversary, March 2025 Lunch Plated/Assisted (Pork stroganoff, Rosemary, Steamed plain rice, chicken, Stir fried vegetable, Catering Services Mango Tapioca (dessert), 500 200 250.00 50.000.00 ml bottled water (drinks) IBS Founding Anniversary March 2025 TOTAL ABO 86.000.00

Reviewed and Checked By:

ANA VERONICAGE EVANGELISTA

BAG 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 on or before the deadline stated herein.

> . TALAG BUYER END-USER

TOTAL QUOTED AMOUNT IN WORDS:

7. Others:

1. Price quotation/s shall be valid for a period of at least (30) calendar days from the date of submission.

5. Quotations exceeding the Approved Budget for Contract shall be rejected.

6. Documentary requirements per Memorandum No. 03 Series of 2017 shall be attached upon submission of the quotation

- 5. UPL Buffer Solution PH (1 liter) 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.

quii	ements for Suppliers (GPPB Resolution No. 21-2017)					
	REQUIREMENTS	Shopping	Negotiated	Negotiated	Negotiated Procurement- Scientific,	Negotiated
		(Section 52)	Procurement-	Procurement-	Scholarly or Artistic Work, Exclusive	Procurement-
			Small Value	Lease of Real	Technology and Media Services	Emergency
			Procurement	Property or Venue	(Section 53.6)	(Section 53.2)
			(Section 53.9)	(Section 53.10)	,	
1	Mayor's/Business Permit	/	/	/	/	/
2	PhilGEPS Registration Number	/	/	/	/	/
3	Professional license/ CV (consulting services)		/		/	

CAB License (for Infrastructure)	/			
5 Income / Business tax returns (except for government agencies as lessor)	FOR ABC'S ABOVE 500K	/	/	FOR ABC'S ABOVE 50K
6 Omnibus Sworn Statement	FOR ABC'S ABOVE 50K			FOR ABC'S ABOVE 500K
7 NFCC for Infrastructure with ABC above Ph500k	/			FOR ABC'S ABOVE 50K

After having carefully re Name of the Company:	ead and accepted your General Conditions, I/We qu	oote you on the Item at prices noted above.	
Address:		Tel. No. :	
		Fax No. :	
Signature over Printed Name of Representative:		Email Address:	
Position:		Date:	