

REQUEST FOR QUOTATION

Western Mindanao State University

Quotation No.: _____

PR No.: **24-11-576**

Please quote your lowest price on the item/s listed below, subject to the General Conditions on the page, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than DEC 2 6 2024 at **9:30 A.M.** in the return envelope attached herewith. Any quotation submitted beyond this date will not be considered.

JOSELITO D. MADROÑAL, DPA
BAC Chairperson for GOODS

NOTE:

- 1 ALL ENTRIES MUST BE TYPEWRITTEN
- 2 DELIVERY PERIOD _____ CALENDAR DAYS UPON RECEIPT OF THE PURCHASE ORDER.
- 3 WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPPLIES AND MATERIALS. ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY WESTERN MINDANAO STATE UNIVERSITY
- 4 PRICE VALIDITY SHALL BE FOR A PERIOD OF 120 CALENDAR DAYS UPON RECEIPT OF THE PURCHASE ORDER
- 5 G-EPS REGISTRATION CERTIFICATE SHALL BE ATTACHED UPON SUBMISSION OF THE QUOTATION
- 6 BIDDERS SHALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATIONS OF THE PRODUCT BEING OFFERED


Item No.	Qty	Unit	Item and Description	Approved Budget for the Contract (ABC)	Unit Cost	Total Cost
1.	86	pax	FOOD AND VENUE December 11, 2024 (1 day) 1 Meal (Lunch) & 2 Snacks (AM/PM) -Buffet Type -"NO PORK" menu -Lunch serving time: 11:30 am VENUE REQUIREMENTS: LCD Projector with Screen Sound System Venue Capacity: that can accommodate 100 pax Unlimited coffee and mineral water Hot and Cold water dispenser Standby generator in case of power interruption Free WIFI access. 550.00/pax.	P47,300.00		
			Note: For the External Studies of the WMSU Pagadian Campus of the University			
				Total:	_____	

EPS Reference Number : _____
 EPS Solicitation Number : _____
 EPS Closing Date : _____

Brand & Model : _____
 Delivery Period : _____
 Warranty : _____
 Price Validity : _____

After having carefully read and accepted your General Conditions, the foregoing are our price quotation for the items above indicated.

PhilGEPS Certificate No.: _____
Certificate Reference No.: _____


REY ESPIRITUSANTO / JORGE CONCEPCION / DANN VINCENT VILLAREAL
 Canvasser

Printed Name/Signature

Tel .No./Cellphone #

Date