

REQUEST FOR QUOTATION

Western Mindanao State University

Quotation No.: _____

PR No.: PR-22-05-270-Rebid

AUG 01 2022

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 _____ at
10:00 AM in the return envelope attached herewith. Any quotation submitted beyond this date will not be considered.


JOEL G. FERNANDO, Ph.D.
 BAC Chair

NOTE:

- 1 ALL ENTRIES MUST BE TYPEWRITTEN
- 2 DELIVERY PERIOD WITHIN 10 CALENDAR DAYS FROM THE 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 Contract (ABC)	Unit Cost	Total Cost
1.	2	Units	Handheld GPS Specifications: - Supports for GPS and Glonass Satellite System - Sunlight-readable color display - Display Resolution: 240 x 320 pixels - Memory: at least 8GB - With MicroSD Slot - Battery life: up to 25 hours in GPS mode with battery - Map type: Topographical - Pre-loaded with TopoActive Maps with routable roads and trails - Waypoints: at least 2,000 points - Water Resistant (IPX7)	₱ 29,000.00		
			<i>Note: For the Planning Office of the University.</i>			

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EPS Reference Number : _____

EPS Solicitation Number : _____

EPS Closing Date : _____

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

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

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

REY ESPIRITUSANTO / JORGE CONCEPCION / RALPH JUDE LLACUÑA
 Canvasser

 Printed Name/Signature

 Tel .No./Cellphone #

 Date