

## Republic of the Philippines WESTERN MINDANAO STATE UNIVERSITY

Zamboanga City Telephone No.: 062-991-7875 www.wmsu.edu.ph

## REQUEST FOR QUOTATION

The Western Mindanao State University, through its Bids and Awards Committee (BAC), is inviting PhilGEPS registered suppliers to apply for eligibility and to submit bids for the item mentioned hereunder:

Name of Project: Supply and Delivery of Lever Arch File and Clear Sheet protector

Approved Budget Cost: Php 57,000.00 Purchase Request No.: PR 23-04-256 Closing Date: June 6, 2023 @ 9:30 AM

Description:

1.) Fifty (50) PC of LEVER ARCH FILE

2 RING

COLOR: RED SIZE: LONG

WIDTH: 3 INCHES.

2.) Forty (40) box of CLEAR SHEET PROTECTOR

11-HOLE POCKET 100 SHEETS/BOX

SIZE: LONG.

The criteria to be used for the eligibility check of the prospective bidders, examination and evaluation of bids, post-qualification and all matters relevant to this procurement shall be in accordance with Republic Act. No. 9184 (The Government Procurement Reform Act) and its Implementing Rules and Regulations.

Interested bidders are required to submit their valid and current Mayor's Permit and PhilGEPS Registration, upon the submission of quotation.

Award of contract shall be made to the lowest calculated and responsive bid, which complies with the necessary description as stated above and other terms and conditions stated in the price quotation form.

Any interlineations, erasures or overwriting shall be valid only if they are signed or initiated by the bidder or his/her duly authorized representative/s.

Submission of Quotation and eligibility documents is on or before June 6, 2023 at the BAC Office, 2nd Floor, Admin Building, Western Mindanao State University, Normal Road, Baliwasan, Zamboanga City. Open submission may be submitted manually, email (bacsecretariate@wmsu.edu.ph) or through facsimile at (062)991-7875. For inquiries, you may coordinate with the BAC Secretariat at telephone no. (062)991-7875

## **REQUEST FOR QUOTATION**

Western Mindanao State University

|                                    |           |   | -  | Quotation No.:                               |   |   |                  |  |
|------------------------------------|-----------|---|--|--|---|---|------------------|--|
|                                    |           |   |  |  |   | PR No.: 23-04-256                         |                  |  |
|                                    | Please    | quote your lo   | west price on the item/s listed below, subject to  | the Gene                                     | eral Conditions                                   | on the page, sta                          |                  |  |
| shortest<br>at <u>9:30</u>         | time of c | delivery and s<br>he return env   | submit your quotation duly signed by your repre<br>relope attached herewith. Any quotation submit  | esentative<br>tted beyon                     | not later than<br>d this date wil                 |   |                  |  |
| NOTE:                              |           |   |  |  |   | O D. MADRON<br>hairperson for G           |                  |  |
|                                    | 2         | DELIVERY PE<br>WARRANTY S<br>DATE OF ACC<br>PRICE VALIDI<br>G-EPS REGIS | MUST BE TYPEWRITTEN  RIOD WITHIN 10 CALENDAR DAYS FROM THE RECE  FHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPF  SEPTANCE BY WESTERN MINDANAO STATE UNIVERSIT  TY SHALL BE FOR A PERIOD OF 120 CALENDAR DAYS  TRATION CERTIFICATE SHALL BE ATTACHED UPON SL  ALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIFI | PLIES AND M<br>Y<br>UPON RECE<br>JBMISSION ( | ATERIALS. ONE<br>EIPT OF THE OUI<br>OF THE QUOTAT | (1) YEAR FOR EQUII<br>RCHASE ORDER<br>ION | PMENT, FROM      |  |
| Item<br>No.                        | Qty       | Unit  | Item and Description   |  | the Contract<br>(ABC)                             | Unit Cost                                 | Total Cost       |  |
| 1.                                 | 50        | Pieces  | LEVER ARCH FILE  | ₱  | 25,000.00   |   |                  |  |
|                                    |           |   | * 2 RING   |  |   |   |                  |  |
|                                    |           |   | * COLOR: RED   |  |   |   |                  |  |
|                                    |           | ,   | * SIZE: LONG   |  |   |   |                  |  |
|                                    |           |   | * WIDTH: 3 INCHES  |  |   |   |                  |  |
| 2.                                 | 40        | Boxes   | CLEAR SHEET PROTECTOR  | ₽  | 32,000.00   |   |                  |  |
|                                    |           |   | * 11-HOLE POCKET   |  |   |   |                  |  |
|                                    |           |   | * 100 SHEETS/BOX   |  |   |   |                  |  |
|                                    |           |   | * SIZE: LONG   |  |   | 3   |                  |  |
|                                    |           |   | Note: For the College of Medicine  |  |   |   |                  |  |
| EPS Reference Number : PAGE 1 0f 1 |           |   |  |  |   | Total:<br>Brand & Model                   | :                |  |
| EPS Solicitation Number :          |           |   |  |  |   | Delivery Period<br>Warranty               |                  |  |
|                                    | sing Date | :_  |  |  |   | Price Validity                            |                  |  |
|                                    | After hav | ving carefully r  | read and accepted your General Conditions, the for   | egoing are                                   | our price quota                                   | tion for the items a                      | above indicated. |  |
|                                    |           |   | Г  | PhilGEPS                                     | Certificate I                                     | No.:                                      |                  |  |
|                                    |           |   | L,   | Certificat                                   | e Reference                                       | No.:                                      |                  |  |
|                                    |           |   |  |  |   |   |                  |  |
|                                    | REYNAM    | NTE ESPIRITU  | ISANTO / JORGE CONCEPCION / RALPH JUDE L   | LACUÑA                                       | Printed Name/Signature                            |   |                  |  |
|                                    |           |   | Canvasser  |  | 1   | el .No./Cellphone #                       | ŧ .              |  |
|                                    |           |   |  |  |   | Date                                      |                  |  |
|                                    |           |   |  |  |   |   |                  |  |