



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 Room Accommodation for the Social Work Review Program 2023 of the Center for Continuing Education (CCE) of the University**

Approved Budget Cost: **Php 5,400.00**
Purchase Request No.: **PR: 23-08-414**
Closing Date: **September 6, 2023 @ 9:30 AM**
Description:

- 1. One (1) Lot – ACCOMMODATION**
for Speaker for Two (2) Nights, 1 single Queen Size Superior
Breakfast and Dinner only for 2 days
Check-in Date: **September 8, 2023 @ 2:00PM**
Check-out Date: **September 10, 2023 @ 12:00PM**

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 **September 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.: 23-08-414

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 SEP 0 6 2023 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 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 the Contract (ABC)	Unit Cost	Total Cost
1.	1	Lot	<p style="text-align: center;">Accommodation</p> <p>for Speaker for Two (2) Nights, 1 single Queen Size Superior Breakfast and Dinner only for 2 days Check-in Date: September 8, 2023 @2:00PM Check-out Date: September 10, 2023@ 12:00PM</p> <p style="text-align: right;"><i>Note: For the CCE</i></p>	₱ 5,400.00		

EPS Reference Number : _____

EPS Solicitation Number : _____

EPS Closing Date : _____

PAGE 1 of 1

Total:

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 / RALPH JUDE LLACUÑA
Canvasser

Printed Name/Signature

Tel .No./Cellphone #

Date