



**UNIVERSITY OF THE PHILIPPINES BAGUIO**  
 Governor Pack Road, Baguio City, Benguet, CAR  
 VAT Reg. TIN: 000-864-006-00007  
 Telefax No.: (074) 442-3484

**Request for Quotation**  
**UPB Supply and Property Management Office**

Date: September 03, 2020  
 RFQ No.: 1706  
 MOP: Small Value Procurement

Please quote your lowest price on the Item/s listed below, subject to the General Conditions stated herein, starting the shortest time of delivery and submit your Quotation duly signed by your representative not later than September 9, 2020 @ 5:00 pm in a sealed envelope or email to spmo.upbaguio@up.edu.ph

- Note: 1. All entries must be typewritten and/ or legibly handwritten.  
 2. Delivery period within 30 Calendar days from the receipt of Purchase Order.  
 3. Warranty shall be for a period of six (6) months for supplies and materials, one (1) year for equipment, from the date of acceptance by the procuring entity.  
 4. Price validity shall be for a period of 90 calendar days  
 5. Mayor's/Business Permit, Income/Business Tax Returns, Duly Notarized Omnibus Sworn Statement and PhilGEPS Registration Number shall be attached upon submission of the quotation.  
 6. Bidders must indicate the Brand and Model Number offered when appropriate.  
 7. Others: Payment Terms In Check Form payable to supplier 20 days after complete delivery

**ICT Devices for Museo Kordilyera**

ITEM NO.	GENERAL DESCRIPTION	UOM	QTY	Compliance with technical specifications (Pls. check)		UNIT PRICE	TOTAL PRICE	QUOTED UNIT PRICE	TOTAL QUOTED PRICE
				YES	NO				
1	Flash Drive, USB 16GB	pc	150			400.00	60,000.00		
<b>TOTAL:</b>							<b>₱ 60,000.00</b>		
<b>TOTAL QUOTED AMOUNT IN WORDS:</b>									

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 or on or before the deadline stated herein.

  
 IRENE ENRIQUEZ  
 Chief, SPMO

After having carefully read and accepted your General Conditions, I/We quote you on the Item at prices noted above.

Name of the Company: \_\_\_\_\_ Tel. No.: \_\_\_\_\_  
 Address: \_\_\_\_\_ Fax No.: \_\_\_\_\_  
 Name of Representative: \_\_\_\_\_ Email Address: \_\_\_\_\_  
 Position: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_