

UNIVERSITY OF SOUTHEASTERN PHILIPPINES

Obrero Campus, Bo. Obrero Davao City
Medical/Dental Clinic

Request for Quotation

PR. No. 2021-03-105

Date: 15 MARCH 2021

Company Name:

Address:

Please quote your lowest price on the items / listed below, subject to the General Condition on the last page, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than in the return envelope attached herewith

DR. REYNILLO D. GARCIA
BAC CHAIRMAN

17 March 2021

- Note: 1. All entries must be typewritten.
2. Delivery Period within calendar days upon 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 date of acceptance by the procuring entity.
4. Price validity shall be a period of 30 calendar days.
5. G-EPS Registration Certificate shall be attached upon submission of the Quotation.
6. Bidders shall submit Original Brochures showing certification of the product being offered (optional).
7. Mode of delivery: [] Pick-up (Schedule) [x] Door to Door Delivery

Table with columns: Item No., Unit, ITEM AND DESCRIPTION, QTY, BID PRICE (UNIT PRICE, TOTAL AMOUNT). Contains 19 rows of medical supplies with their respective units and quantities.

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

Printed Name/Signature

Authorized Canvasser

Tel. No./Cellphone No.

Tin No. of Establishment

Date