Republic of the philippines
UNIVERSITY OF SOUTHEASTERN PHILIPPINES
Maharlika, Bislig City

REQUEST FOR QUOTATION

Company Name : _____
Address: _____

PR #: 2019-10-238
DATE: 10/11/2019

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 ____2 days____ in the return envelope attached herewith

ANCHIE C. VILLAESTER
BAC Chairman

Note : 1. All entries must be typewritten.
2. Delivery Period within __2__ 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

Item No.	Unit	ITEM AND DESCRIPTION	QTY	BID PRICE	
				UNIT PRICE	TOTAL AMOUNT
1	unit	Xerox / Photocopier Machine	1		
		Specifications:			
		Maximum Print Resolution: 1200 x 1200 DPI			
		Printer Function Type:			
		Multi-Function (Color Laser printer, Scanning, Office Printer			
		Copying, Printer Consumables)			
		Double Sided Printing: YES			
		Printer Connectivity Type: Wired / wireless network printing			
		Max Print Resolution Color: 600 x 600 dpi			
		USB Support: YES			
		Paper Handling: Short (8.5" x 11"), Long (8.5" x13"), A4(8.27" x 11.69") Legal (8.5" x 14") up to A3 (11.69" x 16.53")			
		Mono & Color			
		Print Speed (CPM) : 31 ppm and up			
		Output Tray Capacity: 81-100 sheet			
		******Nothing Follows******			
PURPOSE:		***For Office, theses and Lab Subject Copy Use***			

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

Canvassed By:

_____
Authorized Canvasser

_____
Printed Name / Signature

_____
Tel. No. / Cellphone No.

_____
TIN No. of Establishment

_____
Date

_____
PHILGEPS REGISTRATION NUMBER