	Republic of the Philippines	Document No.: BASC-PRO-QSF-02
	BULACAN AGRICULTURAL STATE COLLEGE	Rev. No.: 00
	REQUEST FOR QUOTATION	Effectivity Date: 06/03/2019

Project Reference Number:
Name of the Project:
Location of the Project:

Date: _____
Quotation No. _____

Company Name _____
Address _____

Please quote your lowest price on the item/s listed below, subject to the General Conditions on the last page, stating the shortest time of delivery and sumbit your quotation duly signed by your representative not later than _____ in the return envelope attached herewith.

_____
MANDY D. BERNARDO
Procurement Officer

NOTE:
1. THE APPROVED BUDGET FOR THE CONTRACT IS _____.
2. ALL ENTRIES MUST BE TYPEWRITTEN.
3. DELIVERY PERIOD WITHIN _____ CALENDAR DAYS.
4. WARRANTY SHALL BE FOR A PERIOD OF three (3) MONTHS FOR NON-EXPENDABLE SUPPLIES ONE (1) YEAR NON-EXPENDABLE SUPPLIES FROM DATE ACCEPTANCE BY THE PROCURRING ENTITY.
5. PRICE VALIDITY SHALL BE FOR A PERIOD OF _____ CALENDAR DAYS.
6. PHILGEPS REGISTRATION CERTIFICATE SHALL BE ATTACHED UPON SUBMISSION OF THE QUOTATION.
7. BIDDERS SHALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATION OF THE PRODUCT BEING OFFERED.

ITEM No.	Unit	ITEM & DESCRIPTION	QTY	UNIT PRICE	TOTAL
1	bottles	Epson ink 664 black	40		
2	bottles	Epson ink 001 black	10		
3	bottles	Epson ink 001 cyan	10		
4	bottles	Epson ink 001 magenta	10		
5	bottles	Epson ink 001 yellow	10		
6	bottles	Epson ink 003 black	100		
7	bottles	Epson ink 003 yellow	20		
8	bottles	Epson ink 003 magenta	20		
9	bottles	Epson ink 003 cyan	20		
10	bottles	Brother ink BT 6000 black	20		
11	bottles	Brother ink BT 5000 cyan	10		
12	bottles	Brother ink BT 5000 magenta	10		
13	bottles	Brother ink BT 5000 yellow	10		
14	pcs	USB Flasgdrive 16Gb	18		
15	pcs	USB Flasgdrive 32Gb	20		

Item No. _____ Item No. _____

Brand and Model _____ _____ _____
Delivery Period: _____ _____ _____
Warranty: _____ _____ _____
Price Validity: _____ _____ _____

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

_____
Printed Name / Signature

_____
Tel. No. / Cellphone No.
e-mail address

_____
Date