



Republic of the Philippines  
Province of Pampanga  
**Bids and Awards Committee**  
Provincial Capitol, City of San Fernando, (P) / (045) 435-5901

JUN 21 2024

RFQ No. **2406011**  
P.R. No. / Date / End User / Purpose:  
**(24-3335 6/5/2024 Provincial Health Office To be used in the Alagang Nanay Medical Mission)**

**REQUEST FOR QUOTATION**  
Shopping

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Tel. No.: \_\_\_\_\_

Please quote your lowest price for the requirements listed hereunder subject to the Terms and Conditions stated below and submit to this Office duly signed by you or your representative not later than **4:00 p.m. JUN: 25 2024**

APPROVED BUDGET FOR  
THE CONTRACT (ABC):  
**PhP 128,000.00**

**FRANCIS T. MASLOG**  
VICE-CHAIRPERSON *Plus*  
Bids and Awards Committee

**TERMS AND CONDITIONS**

- All quotations may be typewritten or handwritten, placed in a sealed envelope.
- All quotations shall be valid for one hundred twenty (120) calendar days from the deadline of the submission of the same.
- Any erasures or overwriting shall be valid only if they are signed or initialed by the supplier or its authorized representative.
- Interested suppliers are required to submit their valid current Mayor's Permit, PhilGEPS Registration Number upon submission of quotation. In lieu of Mayor's Permit and PhilGEPS Registration Number, the PhilGEPS Certificate of Platinum Membership maybe submitted. For new businesses, submit the BIR Certificate of Registration and latest quarterly return or percentage tax.
- The applicable rate for late deliveries is one tenth (1/10) of one percent (1%) of the cost of the unperformed portion for everyday of delay.
- The Provincial Government of Pampanga reserves the right to accept or reject any quotation, and to annul the procurement process and reject all quotations at any time prior to contract award, without thereby incurring any liability to the affected supplier/s.
- The PGP also reserves the right to waive any required formality in the proposals received, and select the proposal which it determine to be the most advantageous to the government.

Item No.	Qty	Unit	Item Description	Unit Price	Total Price
1	2	Unit	DESKTOP COMPUTER with PRINTER Processor: at least 20M Cache, up to 4.6 GHz, at least 10 Cores and 16 Threads Memory : at least 8GB DDR4 Storage : at least 256GB SSD + 1TB HDD / at least 256GB M.2 SSD + 1TB HDD I/O Ports : Audio Jack, USB, HDMI, LAN Display : at least 21.5" Networking : Wireless LAN OS : at least Windows 11 Home Office : at least MS Office Home and Student 2021 Others : Not cloned, at least UHD Graphics Printer : with Genuine Integrated Ink Tank System, All-in-One (Print, Copy, Scan) ink Jet, up to 1200 x 4800 dpi or 4800 x 1200 dpi print resolution, up to 600 x 1200 dpi scan resolution, Flatbed colour image scanner type, Paper Size (A4, Letter, Legal, User Defined) UPS : At least 650VA, with built-in AVR, at least 4 universal sockets or 4 NEMA Sockets Warranty : 1 year warranty on parts and services		

No.	Qty	Unit	<u>Item Description</u>	Unit Price	Total Price
			<p><b>TERMS OF REFERENCE:</b></p> <p>1. Printed document/material with the brand/model of the item/s offered must be indicated in the quotation and brochure of the item/s must be attached.</p> <p>2. With Service Facility in the locality for after sales service</p> <p>3. The procuring entity reserves the right to conduct product testing/inspection to determine the fitness of the items being offered by prospective suppliers.</p> <p><b>AFTER SALES SERVICE:</b></p> <p>1. Defective items discovered within seven (7) days from date of delivery must be replaced within 24 hours upon notification by the end-user.</p>		
			<p><b>SCHEDULE OF REQUIREMENTS:</b></p> <p>1. Delivery within ten (10) days upon receipt of PO/NOA.</p>		
<b>Total Lot Price</b>					

THE BIDS AWARDS COMMITTEE:

Having carefully read and accepted your Terms and Conditions, including the technical specifications, I/We offer to supply/deliver the item/s as noted above.

\_\_\_\_\_  
Supplier's authorized representative signature over printed name  
Designation: \_\_\_\_\_  
Contact No.: \_\_\_\_\_  
Email Address.: \_\_\_\_\_

\_\_\_\_\_  
BAC CANVASSER

May