

Republic of the Philippines Province of Pampanga

Bids and Awards Committee

Provincial Capitol, City of San Fernando, (P) / (045) 435-5901

NOV 2 0 2024

RFQ No. 241145

P.R. No. / Date / End User / Purpose:

(24-5708(H5) 11/12/2024 ERDH For Chief Nurse, COH, Cashier and	(24-5708(H5) 11/12/2024 ERDH For Chief Nurse, COH, Cashier and other HOMIS users.)		
REQUEST FOR QUOTATION Shopping			
Company Name:Address: Tel. No.:			
Please quote your lowest price for the requirements listed hereunder subject to the Terms ar Office duly signed by you or your representative not later than $4.00 \mathrm{p.m.} $	d Conditions stated below and submit to this 2024		

APPROVED BUDGET FOR THE CONTRACT (ABC):

PhP 139,000.00 /

CHAURPERSON

Bids and Awards C

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 race 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 cuotation, 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.

ltem No.	Qty	Unit	<u>Item Description</u>	Unit Price	Total Price
1	1	unit	Print Method: Impact dot matrix Number of Pins in Head: 9-pin Print Direction: Bi-direction Paper Size: Cut Pater- A4, Letter, Legal Continuous Paper- L(4.0-22.0") W(4.0-10.0") Paper Feeding: Friction, Push Tractor Copies: Original + 4 copies Interface: USB 2.0 Full-Speed Ribbon Cartridge: Fabric Ribbon Cartridge (Black)		
2	2	unit	Laptop Computer Processor: at least 12M Cache, up to 4.60GHz, up to 10 Cores & 12 Threads Memory: at least 16GB DDR4 Storage: at least 512 GB M.2 SSD Graphics: at least integrated GPU with up to 1340Mhz speed Display: at least 14" OS: at least Window 11 Office: at least MS Office Home & Student 2021 Others: With built-in Camera and Laptop Bag Warranty: at least 1 Year Warranty on parts and Services		
3	5	unit	Inkjet Printer - with Genuine Integrated Ink Tank System Print Solution: at least 720 x 720 dpi Paper Size: A4, Letter, Legal, User Defined Warranty: 1 Year Warranty on parts and service		

	Item Description		1,011 0 0 500
	<u> </u>	Unit Price	Total Price
	TERMS OF REFERENCE: 1. Printed documents/ materials with the brand, model or specifications of the items being offered must be attached together with the quotation. 2. The procuring entity reserves the right to conduct product testing/ inspection to determine the fitness of the items being offered by prospective supplier/s.		
	AFTER SALES SERVICE: 1. At least one (1) year warranty on parts and service. 2. Defective items discovered within seven (7) days from date of delivery must be replaced within 24 hours upon notification by the end user.		
	SCHEDULE OF REQUIREMENTS: 1. Delivery within ten (10) calendar days upon receipt of PO/NOA.		
	Total Lot Price		
E BIDS AWA	RDS COMMITTEE:	SPECIAL SECURITY AND ADDRESS OF THE SPECIAL SECURITY AND ADDRESS O	Market State Control of the Control
	y read and accepted your Terms and Conditions, including the technical specifications, I/W	/e offer to supply/d	eliver the item/s

Supplier's authorized representative signature over printed name	
Designation:	BAC CANVASSER
Contact No.:	
Email Address.:	
	May