Region XII
Division Of General Santos City
BIDS AND AWARDS COMMITTEE
DEPARTMENT OF EDUCATION
REQUEST FOR QUOTATION

Date: **May 10, 2023**
Quotation No.: **RFQ 2023-05-084**

_____
(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 if delivery and submit your quotation dulysigned by your representative not later than _____in the return envelope attached herewith.

CARLOS G. SUSARNO PhD., CESE
BAC CHAIRMAN

NOTE:

1 **PLS. PRINT ALL ENTRIES**
2 **DELIVERY PERIOD WITHIN_____CALENDAR DAYS**
3 **WARRANTY SHALL BE FOR A PERIOD OF SIX(6) MOS. FOR SUPPLIES & MATERIALS, ONE(1) YR. FOR EQUIPMENT,**
4 **FROM THE DATE OF ACCEPTANCE BY THE PROCURING ENTITY**
5 **PRICE VALIDITY SHALL BE FOR A PERIOD OF _____ CALENDAR DAYS**
6 **G-EPS REGISTRATION CERTIFICATE SHALL BE ATTACHED UPON SUBMISSION OF THE QUOTATION**
7 **BIDDERS SHALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATIONS OF THE PRODUCT BEING OFFERED**
8 **BIDDERS SHALL SUBMIT INDIVIDUAL BID PRICE.**

ITEM NO.	Item description	unit	quantity	Approved Budget for the Contract		Brand	BID AMOUNT	
				Unit Cost	Total		Unit Cost	Total
	Lot: Biometrics Attendance System Upgrade							
1	Biometrics Attendance Device	unit	2	8,600.00	17,200.00			
2	All-in-one PC	unit	1	45,000.00	45,000.00			
3	Installation and Integration Costs	pc	1	5,000.00	5,000.00			
4	Annual License Renewal	pc	1	1,500.00	1,500.00			
	(Please see attached specifications)				-			
	***** nothing follows *****				-			
					-			
					-			
					-			
				GRAND TOTAL	**68,700.00**			

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

DepEd Division of General Santos City
Name of the Procuring Entity

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

REFERENCE	
PR #	PR 2023-05-084
DATE	May 10, 2023

_____
Printed Named/Signature

_____
Tel. No./Cellphone No. email address

_____
Date

DepEd-GSC/BAC
PHILGEPS REF. No. _____ **Date Published:** _____ **Closing Date:** _____ **8:00:00 am**