



PAMANTASAN NG LUNGSOD NG MAYNILA

(University of the City of Manila)
Intramuros, Manila

REQUEST FOR PROPOSAL

Date: AUG 05 2016
RFP No.: 080416-242

Company Name: _____

Address: _____

TIN: _____

Business Permit No.: _____

Please quote your best offer for the item/s described below, subject to the Terms and Conditions provided at the back portion of this request for quotation. Submit your quotation duly signed by you or your duly authorized representative not later than AUG 12 2016.

Open quotations may be submitted, manually or through facsimile or email at the address and contact number indicated below.

Atty. ELMO R. CORTEZ
Acting Chief, GSO-Procurement Section

After having carefully read and accepted the Terms and Conditions, I/We submit our quotation/s for the item/s as follows:

| Item Description | Qty. | Unit of Issue | Approved Budget for the Contract (ABC) | OFFER | | | | |
|--|------|---------------|--|--------------------------|-------------|---|----|---------|
| | | | | Price (Inclusive of Tax) | | Compliance with Technical Specifications (please check) | | Remarks |
| | | | | Unit Price | Total Price | Yes | No | |
| Purchase of supplies/parts for Ineo+200 copier | 1 | lot | | | | | | |
| Imaging unit 212 magenta | 1 | unit | 39,500.00 | | | | | |
| Transfer belt kit | 1 | unit | 12,121.00 | | | | | |
| Total | | | 51,621.00 | | | - | | |

This is to certify that I personally conducted the canvass and that the data herein are true and correct.

NOLI C. DISCAYA, JR.
Canvasser

Mobile No.: 0917-5794712

Email Add.: ncdiscaya@plm.edu.ph

Payment Terms: _____

Delivery Period: _____

(Signature over Printed Name)

Tel. No.: _____

Mobile No.: _____

E-Mail: _____

Gen. Luna cor. Muralla Sts., Intramuros, Manila
Telefax No. (02)528-4592, Email add: procurement@plm.edu.ph