## PHILIPPINE PORTS AUTHORITY

PORT MANAGEMENT OFFICE SOCSARGEN

Port Area, Makar Wharf, General Santos City

Tel. No.: (083)552-4484; 301-8671; FAX No. (083)552-4446; 301-2076; 301-2078

Standard Form Number: SF-GOOD-60

Revised on May 24, 2004

Standard Form Title: Request for Quotation PR NO. GEN-6638-22

Date

## **REQUEST FOR PRICE QUOTATION**

NAMI	OF SUPPLIER	RPQ NO.	0305004-22			
Office	Address	Date Prepared: 3/28/2022				
stating repres	Please quote your lowest price on the item/s listed below, subjeton the shortest time of delivery and submit in a sealed envelope, you entative not later than					
NOTE		<u>. l</u>	DEOLITO B. TORREFIEL  BAC Chairman			
2. 3. 4. 5.	ALL ENTRIES MUST BE WRITTEN/TYPEWRITTEN DELIVERY PERIOD WITHIN THIRTY (30) CALENDAR DAYS WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUP YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY THE PRO PRICE VALIDITY SHALL BE FOR A PERIOD OF CAL G-EPS REGISTRATION CERTIFICATE SHALL BE ATTACHED UPON SI BIDDERS SHALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIF	CURING ENTIT LENDAR DAYS UBMISSION OF	Y THE QUOTATI			
Item No.	ITEM DESCRIPTION	QTY	UNIT	UNIT PRICE		
1	Smart Tank 615 Wireless All-in-One Printer (see attached picture	e) 4	Unit			
noted	After having carefully read and accepted your General Conditionabove.	ns, I/We quote	you on the ite	m/s at prices		
		<del></del> -	Printed Name/Signature			
		email:	Tel. No./Cellp	hone No.		
Canvas	ssed by: OLIVER A. NADELA	Giliali.				
Date ca	anvassed:					

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NOTE:					-	DEOLITO B. BAC Ch		
2. I 3. \ 4. I 5. (	DELIVERY PERI WARRANTY SH YEAR FOR EQU PRICE VALIDITY G-EPS REGISTF	IUST BE WRITTEN/TY IOD WITHIN THIRTY (3 ALL BE FOR A PERIO IPMENT, FROM DATE I/ SHALL BE FOR A PERATION CERTIFICATE L SUBMIT ORIGINAL	30) CALENDAR DA D OF SIX (6) MON E OF ACCEPTANCE ERIOD OF SHALL BE ATTAC	THS FOR SUPP E BY THE PROC CALE CHED UPON SU	URING ENTI ENDAR DAYS BMISSION OF	TY THE QUOTATION		
Item No.	ITEM DESC	RIPTION			QTY	UNIT	UNIT PRICE	
noted a		carefully read and a	ccepted your Gen	eral Condition	s, I/We quote	e you on the iter	m/s at prices	
						Printed Name/Signature		
						Tel. No./Cellphone No.		
Canvas	sed bv· OLI	VER A. NADELA			email:	·		
	nvassed:	TEN A. NADELA						