DAVAO ORIENTAL STATE UNIVERSITY "A University of excellence, innovation, and inclusion"



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 FM-DOrSU-PROC-10

 Issue Status
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 1
 0
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 1 of 2

REQUEST FOR QUOTATION (SMALL VALUE PROCUREMENT)

September 13, 2024 Date

Dear Supplier/Service Provider

You are hereby informed that the Davao Oriental State University (DOrSU) wherever deemed proper and authorized under Rule XVI, IRR of RA 9184, will receive sealed price quotation for the supply/delivery of the following items/goods or services at DOrSU, City of Mati, Davao Oriental where the said quotation will be opened on ______ or wherever deemed necessary as indicated below:

Qty	Unit	Item	Description/Performance of the Item (atleast, the minimum)	Unit Price	Total Cost
			Meals, Snacks & Venue for the 56th Annual Convention of the Federation of Institutions for Marine & Freshwater Sciences, Inc.(FIMFS). Good for 3 days		0050
300	pax	Meals, Snacks and Venue	AM& PM Snacks Option: A - Kakanin, Ice Tea B - Empanada, Softdrinks C - Banana Cake , Sofdrinks Lunch Option: A - Rice, Fried Chicken, Chopsuey, Fruits, Softdrinks B - Rice, Grilled Tuna Sticks, Veggies Salad, Fruits, Softdrinks C - Rice, Chicken Adobo, Chicken Afritada,		
			Fruits, Softdrinks Venue: - Can accommodate 400pax, fully-airconditioned, good internet connection, 1ght & sounds, tables and chair		

Approved Budget: P 585,000.00

PR #:	<u>2024-09-818</u>	Date:	<u>11/9/2024</u>	Reque	esting Unit/Office :	RIC XI - FIMFS				
<mark>Small Va</mark>	alue Procurement Docu	mentary Req								
1.Mayor's/Business Permit										
2. PhilGI	EPS Registration Number	•	S	sgd						
3. Incom	e/Business Tax Return (f	or ABCs abov	DR. CHERY	<u>DR. CHERYLL L. BAUTISTA</u>						
<mark>4. Omnit</mark>	ous Sworn statement (for	ABCs above I	d BAC	BAC Chairperson						
5. Extern	al Provider form (from D		•							
The Bids and Awards Committee:										
I hereby submit my/our offer at the price indicated opposite the items and agree to the terms and										
conditions of this as stated on the flipside of this Request/Invitation.										

Canvassed/Distributed by:

Name of Establishment

Date:_____