STATE UNIVERSITY

DAVAO ORIENTAL

"A University of excellence, innovation, and inclusion"



 Document Code No.

 FM-DOrSU-PROC-09

 ssue Status
 Rev No.
 Effective Date
 Page No.

 1
 0
 07.22.2022
 1 of 2

REQUEST FOR QUOTATION (SHOPPING B)

October 2, 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
Qty 1 1 1	Unit pc pc	Item Wireless Access Point All-in-one Desktop Computer	the minimum) Interface- Gigabit Ethernet (RJ-45) Portx1 (Support IEEE802.3af PoE and Passive PoE); Power supply - 802.3af/at PoE; 24V Passive PoE (+4,5pins; - 7,8pins. PoE Adapter Included); Power Consumtion - EU: 10.5W; US: 12.6W; Dimensions (W x D x H) 8.1 x 7.1 x 1.5in (205.5 x 181.5 x 37.1mm) Antenna Type - 3 Internal Omni; 2.4 GHz: 4 dBi; 5GHz: 5 dBi; Mounting - Ceiling /Wall Mounting (Kits included) Wireless Standards - IEEE 802.11ac/n/g/b/a ; Frequency-2.4GHz and 5GHz Display: 23.8 inches screen; Screen Resolution: 192x1080; CPU: 12 cores Total (4 P Cores 8 E Cores); Cache: 12MB; Memory: 8GB DDR4; Storage: 256GB SSD + 1TB HDD; Wireless LAN: Yes; Wireless LAN Standard: IEEE 802.11 ax;	Price	Cost
			 Bluetooth: Yes; HDMI: Yes; Number of USB 2.0 Ports: 1 ; Total Number of USB ports:5; Network (RJ-45): Yes; Audio Line In: Yes; Audio line Out: Yes; OS Windows 11; with USB mouse and Keyboard 		

Approved Budget: P 70,000.00

9/26/24

Requesting Unit/Office :

OSCD

sgd **DR. CHERYLL L. BAUTISTA**

BAC Chairperson

The Bids and Awards Committee:

Shopping B Documentary Requirements :

<u>2024-10-889A&B</u> Date:

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:

1.Mayor's/Business Permit

PhilGEPS Registration Number
 External Provider form (from DOrSU)

PR #:

Name of Establishment

Date:_____

Authorized Signature