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Issue Status	Rev No.	Effective Date	Page No.
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REQUEST FOR QUOTATION (SMALL VALUE PROCUREMENT)

January 28, 2025

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
5	unit	Welding Machine	Inverter Type, Current Range 10-160A Input Capacity 4 Kva Elec. Diamater 1.2 - 3.2mm Weight 6kg	_____	_____
2	unit	Bench Grinder	6", Power: 1/3HP Speed: 3 550rpm Voltage: 220-240 V Frequency: 50-60 Hz Accessories: Wheel Cover, Full ball bearing, Direct-drive motor	_____	_____
3	unit	Lawn Mower	Grass cutter, gasoline, 2 stroke, 5800W, 52cc, Nylon grass rope, circular saw blade heavy duty	_____	_____
2	unit	Angle Grinder	4", Power: 900W. Disc. Capacity: 100mm, Switch: Slide	_____	_____
1	pc	Portable Power Spray	HPW 220, AC 220-240V - 50/60-Hz, Motor Power: 1200W, Rated Pressure: 700 bar Max Pressure:100 Bar Rate Flow:5.5L/min Max Flow: 6.5L/min	_____	_____
1	pc	Vacuum Pump	for Airconditioning, 1HP, 220V- 50/60Hz heavy duty	_____	_____
1	pc	Industrial Extension Ladder	28ft. Fiberglass, 225lbs heavy duty	_____	_____

Approved Budget: P 80,900.00

PR #: 2025-01-0037 Date: 1/16/2025 Requesting Unit/Office : BC

- Small Value Procurement Documentary Requirements :**
1. Mayor's/Business Permit
 2. PhilGEPS Registration Number
 3. Income/Business Tax Return (for ABCs above P500,000.00)
 4. Omnibus Sworn statement (for ABCs above P50,000.00) before the issuance award
 5. External Provider form (from DOrSU)

sgd
DR. CHERYLL L. BAUTISTA
BAC Chairperson

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:

_____ Date: _____

_____ Name of Establishment

_____ Authorized Signature