

University of the Philippines Visayas

Miagao, Iloilo, Philippines 5023

Supply and Property Services Office

TeleFAX: (033)3159858/3158141

Website: www.upv.edu.ph, Email: spso.upvisayas@up.edu.ph

REQUEST FOR QUOTATION

Date: **2022-08-01**

Quotation No.: **2022-6498**

Mode of Procurement: **SVP**

MPS#: **MPS-2022-0680**

Please quote as your best offer on the term/s listed below, subject to the terms and conditions:

- Submit **sealed quotations** to SPSO Iloilo City or Miagao campus or email to: spso.upvisayas@up.edu.ph
- Indicate company name, address and quotation number on the envelop or in your email subject
- Affix full signature of printed name

Please address to: Emiliza C. Lozada
Chief, SPSO, UP Visayas
Miagao, Iloilo

DEADLINE: 2022-08-08

Emiliza C. Lozada
EMILIZA C. LOZADA
CHIEF, SPSO

No.	Qty	Unit	Item (Descriptions / Specifications)	A	Model	Unit Price	TOTAL Price
				B C			
CO-EARMARKED 2022-07-708-UGTI-CAS-PSM Komsai-2022-07-1							
1	1.00	piece	UPS BATTERY - REPLACEMENT BATTERY CARTRIDGE #55 LINE INTERACTIVE . 2200 VA, TOWER ; NUMBER OF CABLES 1 ; BATTERY TYPE LEAD-ACID BATTERY ; PHYSICAL, COLOUR BLACK ; HEIGHT 17.3 CM ; WIDTH 14.2 CM ; DEPTH 18.3 CM ; NET WEIGHT 24.27 KG ; MOUNTING MODE NOT RACK MOUNTABLE ; USB COMPATIBLE NO ; AMBIENT AIR TEMPERATURE FOR OPERATION 0...40 DEGREE CELCIUS ; OPERATING ALTITUDE 0...10000 FT ; RELATIVE HUMIDITY 0...95% ; AMBIENT AIR TEMPERATURE FOR STORAGE - 15...45 DEGREE CELCIUS ; STORAGE ALTITUDE 0.00...15240.00 M ; STORAGE RELATIVE HUMIDITY 0...95%				
			rec - Pcs, no. n				
			55K				

assigned to: Claude Ticao

Our Terms and Conditions

1. DELIVERY PERIOD Within 30 Working Days Upon Receipt of P.O
2. PLACE OF DELIVERY UPV-SPSO, Iloilo City Campus
3. PRICE VALIDITY 20 Days
4. FREE WARRANTY OF 1 Year
5. PAYMENT TERMS 30 Days

After having carefully read and accepted your terms and conditions, I/we quote you on the item/s at prices noted above.

FAXed:

Date: _____ Time: _____

Personally Distributed:

Received by: _____

Signature over Printed Name

_____ Date

Signature over Printed Name

Contact: Tel#, Cell# or email address

_____ Date

PhilGEPS: Reference # _____ Date _____

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