

REQUEST FOR QUOTATION

\_\_\_\_\_  
 Company Name  
 \_\_\_\_\_  
 Address

Please quote your lowest price on the item/s listed below, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than \_\_\_\_\_.

  
**ANSON M. T. G. TAG**  
 Chairperson, Bids and Awards Committee

- NOTES: 1. ALL ENTRIES MUST BE TYPEWRITTEN OR PRINTED LEGIBLY.  
 2. DELIVERY PERIOD IS WITHIN 15 CALENDAR DAYS.  
 3. WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPPLIES & MATERIALS/ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY THE PROCURING ENTITY.  
 4. PRICE VALIDITY SHALL BE VALID FOR A PERIOD OF 30 CALENDAR DAYS.  
 5. PHIL-GEPS REGISTRATION CERTIFICATE SHALL BE ATTACHED UPON SUBMISSION OF THE QUOTATION.  
 6. BIDDERS SHALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATIONS OF THE PRODUCT BEING OFFERED.

**Title of Procurement:**  
 Supply and Delivery of Camera Tools and Accessories (e.g. Camera Stabilizer and Tripod etc.)  
**Purpose:**  
 For official use of the CAWED  
**Approved Budget for the Contract (ABC):**  
 P75,000.00

ITEM NO.	ITEMS/DESCRIPTIONS	QTY./ UNIT	UNIT PRICE	TOTAL PRICE
1	<b>Camera Stabilizer</b> <i>Technical Specification:</i> Automated Axis Locks Extended Carbon Fiber Axis Arms 4.5kg (10lbs) Tested Payload LiDAR Focusing O3 Pro Transmission Dynamic & amp; Versatile Solution	1 pc	P _____	P _____
2	<b>Tripod</b> <i>Technical Specification:</i> Made of High-quality aluminum alloy Max. load capacity is 10kg 1/4 inch camera screw on its top Compatible with DSLR and smartphone Center shaft is removable	1 pc	P _____	P _____
3	<b>Lapel Microphone</b> <i>Technical Specification:</i> Built-In Omni Mics & amp; 3.5mm Mic Inputs 1 x Mini Clip-On Transmitters/Recorders Stereo or Dual-Mono Outputs Modes USB Audio Interface Functionality	1 pc	P _____	P _____

\*\*\*Continue to next page\*\*\*

Brand : \_\_\_\_\_  
 Delivery Period : \_\_\_\_\_  
 Warranty : \_\_\_\_\_  
 Price Validity : \_\_\_\_\_

After having carefully read and accepted your Request for Quotation, I/We quote you on the item at prices noted above.


\_\_\_\_\_  
 Printed Name/Signature      Tel. No./Cellphone No.      \_\_\_\_\_  
 Email Address      Date

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Address \_\_\_\_\_

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4	<b>Headphones</b> <i>Technical Specification:</i> Sound Isolating & amp; Neutral 40mm Custom-Matched Dynamic Drivers 5Hz to 35kHz Frequency Response Rugged and Modular for Field/Studio use Detachable, Single-Sided Cable Color-Coded Cable Rings	1 pc	P _____	P _____
5	<b>Card Reader Hub</b> <i>Technical Specification:</i> Box Dimensions: 14.5 x 8.5 x 2.5 cm Ports: USB-A 3.0 Ports x3, HDMI port (4k/30Hz) x1, USB-C(w/power delivery)x1, SD 3.0 Card Reader x1, TF 3.0 Card Material: Aluminum  Additional Requests from Procuring Entity: <input type="checkbox"/> Please provide sample upon request of end-user <input type="checkbox"/> Please see full specifications/attached sample design for reference. <input checked="" type="checkbox"/> Other conditions to this request, please state: For more info, please contact the end-user at 8924-6031 loc. 227/229/230/231 Kindly address all proposals to the Chairperson, Bids and Awards Committee  Contract shall be awarded to the bidder per: <input type="checkbox"/> Item basis <input checked="" type="checkbox"/> Lot basis  Bidders must submit the following requirements upon submission of proposal. Non-submission of these requirements shall be grounds for disqualification from the bidding process: 1. DTI/SEC Registration Certificate 2. Valid and Current Mayor's Permit 3. PHILGEPS Certificate of Registration 4. BIR Certificate of Registration 5. Sign and Notarized Omnibus Sworn Statement  <i>Important Note:</i> -For goods, conforms of the winning bidder must be done within seven (7) calendar days upon serving of the PO. -For services, conforms of the winning bidder must be done within fourteen (14) calendar days upon serving of the JO. -Notarization of the OSS should be complied with after the award of the contract but before payment pursuant to item 6.3 of GPPB 09-2020	1 pc	P _____	P _____
<b>GRAND TOTAL</b>			P _____	P _____

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Printed Name/Signature \_\_\_\_\_

Tel. No./Cellphone No. \_\_\_\_\_

Email Address \_\_\_\_\_

Date \_\_\_\_\_

## Photo Reference of Equipment

### Camera Stabilizer

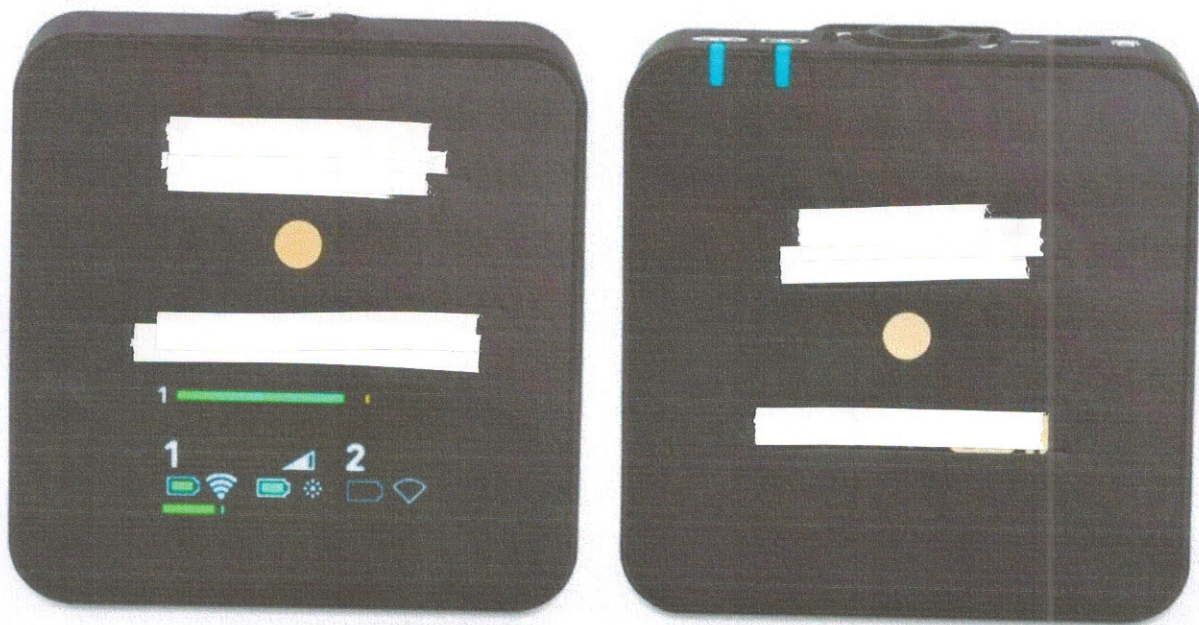




Tripod



## Lapel Microphone



Headphones





