



Republic of the Philippines
OFFICE OF THE DEPUTY OMBUDSMAN FOR LUZON
3F Ombudsman Building, Agham Road, North Triangle, Diliman, Quezon City
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Contact Persons: CATHERINE ISABEL M. FRIAS/MIRIAM JOY G. PANALIGAN

OPEN CANVASS

Tel/Fax:

P.R. NO.:

DATE:

Bidder’s PHILGEPS REGISTRATION NO. ✓

“Manufacturers, suppliers, distributors, contractors, and/or consultants are **MANDATED** to register with PhilGEPS and **provide a PhilGEPS Registration number**... as a condition for award of the contract.”
(Please see GPPB Resolution No. 30-2013 dated 25 October 2013.)

Please quote your lowest government price for the following items specified below. Check/tick the “COMPLY” box if bidder complies with the Ombudsman Specifications. **A quotation containing unchecked/unticked “COMPLY” boxes would be automatically rated as “FAILED.”**

Item No.	ABC (₱)	QTY./ UNIT	OMBUDSMAN SPECIFICATIONS	Kindly tick the box to signify compliance to the specs.	UNIT PRICE	TOTAL PRICE
	PhP 70,000.00	1 unit	HEAVY DUTY PROJECTOR	<input type="checkbox"/> comply		
			Brightness: at least 3300 ansi lumens	<input type="checkbox"/> comply		
			Pixels: at least 1024x768 pixels	<input type="checkbox"/> comply		
			Display resolution: at least 3000:1	<input type="checkbox"/> comply		
			Throw ratio: at least 4:3	<input type="checkbox"/> comply		
			Lamp life: at least 3000-10000 hours	<input type="checkbox"/> comply		
			At least with keystone correction	<input type="checkbox"/> comply		
			With several input/output for computer video and control	<input type="checkbox"/> comply		
			With screen and brackets (if available)	<input type="checkbox"/> comply		

Deadline of submission **TOTAL:**
(Late bids shall not be accepted.)

- IMPORTANT:**
1. **ATTENTION: A bidder who submits a quotation is REQUIRED to download this RFQ from the PHILGEPS website before the closing date for inclusion in the PHILGEPS Document Request List (DRL).**

2. **Bids should be valid for 45 days counted from the deadline of submission.**

3. DELIVERY PERIOD: 10 **WORKING DAYS** upon the receipt of the Purchase Order (Please state the number of days of delivery if beyond the required 10 working days.)

4. Term of Payment: **CHARGED ACCOUNT**, unless specified

5. The total price quoted above is subject to withholding tax and payable check.

6.

**BY THE AUTHORITY OF THE
DEPUTY OMBUDSMAN FOR LUZON:**

Supplier’s Representative (Print Name)

(Sgd.) **ADORACION A. AGBADA**
BAC Chairperson

Signature / Date