

University of the Philippines Visayas

Miagao, Iloilo, Philippines 5023

Supply and Property Services Office

TeleFAX: (033)3159858/3158141

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

REQUEST FOR QUOTATION

Date: **2024-07-01**

Quotation No.: **2024-614**

Mode of Procurement: **SVP**

MPS#: **MPS-2024-0824**

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: sppo.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: 2024-07-08

Emiliza C. Lozada
EMILIZA C. LOZADA
CHIEF, SPSO *alc 7-2-24*

No.	Qty	Unit	Item (Descriptions / Specifications)	A B C	Model	Unit Price	TOTAL Price
TF - Gut Metagenome Y2 Gut_Metagenome-2024-06-3							
1	1.00	kit	Ligation Sequencing Kit V14 A versatile sequencing kit optimized for modal raw read accuracy of Q20+ (99%+) and long read singleplex samples. Specifications: • Preparation time: ~60 minutes • Input requirement: 1 µg of gDNA or 100-200 fmol of amplicons or cDNA • PCR Required: No • Fragmentation: Optional; recommended for inputs of 100-500 ng • Kit chemistry: Kit 14 (V14) • Read length: Equal to fragment length • Pack size: 6 reactions	72,000			
2	1.00	piece	MinION Flow Cell (R10.4.1) A consumable used in MinION and GridION device. Contains the propriety sensory array, Application-Specific Integrated Circuit (ASIC), and R10 nanopores. Contains a double reader-head, and is suitable for experiments where high consensus accuracy is required. Generates data at a mpdal accuracy above 99%.	86,000			

assigned to: Christie Monotilla

Our Terms and Conditions

1. DELIVERY PERIOD 45 wd upon receipt of PO
2. PLACE OF DELIVERY UPV SPSO Miag-ao Campus
3. PRICE VALIDITY 20 days
4. FREE WARRANTY OF 3 months
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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