

PURCHASE REQUEST

CITY GOV'T. OF DAVAO

LGU

1605-347

Department: CMO/ANTI-DRUG ABUSE COUNCIL

PR No.: 1605 347

Date: MAY 19 2016

Section: _____

SAI No.: _____

Date: _____

ALOB No.: _____

Date: _____

| Item No. | Quantity | Unit of Issue | Item Description | Estimated Unit Cost | Estimated Cost |
|----------|----------|---------------|--|---------------------|----------------|
| 1 | 1 | unit | CAT. 10- COMPUTER EQUIPMENT & ACCESSORIES Computer, Branded, Intel Core i7- Fourth Generation or latest (3.4GHz or higher) Processor; 4 GB or higher Memory DDR 3, 1 TB Hard Disk SATA, DVD SuperMulti Drive, 2 GB Video Card, 18.5" LED Monitor, Keyboard, Mouse, Speakers; AVR 500 Watts or higher with three (3) or more power outlet, Operating System Windows 10 Professional 64-bit Full Package Product (FPP), one (1) year or more warranty on parts and on-site repair/service | 60,000.00 | 60,000.00 |
| 2 | 1 | unit | Printer, Color, Multi-function (print/copy/scan) with Integrated Ink Tank System, Print Resolution: 5760 x 1440 dpi, Print Speed: Black -27 ppm (7ipm); Color-15 ppm (3.5 ipm); Photo-69 seconds per 10 x 15 cm, Scanning Resolution: 600 x 1200 dpi, Scan Speed; Black 300 dpi (2.4 msec/line); Colour-300 dpi (9.5msec/line); 50 Sheets paper tray capacity, One (1) year warranty on parts and on-site repair/service Delivery period: 15 working days upon receipt of Approved P.O. 1. All quoted prices shall be inclusive of VAT 2. All quoted items shall be brand new. Indicate if whether genuine/original or replacement. 3. Indicate warranty, including its duration and other important terms and conditions. | 3,000.00 | 3,000.00 |

"This is to certify that the items stated above are included in the Project Procurement Management Plan under page 1.

WILLIAM I. RAMIREZ
Action Officer

Alex G. Macarabog
ALEX G. MACARABOG
Administrative Officer III

**NEGOTIATED
PROCUREMENT**

SMALL VALUE PROC.

BAC Res. No. 7-003
S. 2016 dated 7/19

Page 1 of 2

63,000.00

Purpose: For Office Use.

CONTROLLED & CHARGE TO: 9994-12

FUND ACCT. CODE: 223

NAME & SIGNATURE OF CONT. [Signature]

| | | |
|---|------------------------------------|---------------------------|
| Requested by: | Cash availability | Approved by: |
| Signature: <u>[Signature]</u> | Controlled/Charged to: | |
| Printed Name: <u>ATTY. TRISTAN D. DOMINGO</u> | Fund Account Code: | |
| Designation: <u>Asst. City Administrator</u> | Controller: <u>VILLA V. DUREZA</u> | <u>RODRIGO R. DUTERTE</u> |

Original copy; Green copy for City Treasurer's Office; Blue copy for City Accounting Office; White copy for City Procurement Office; White copy for Requesting Department

16-15456-180,750/6/25

TRISTAN D. DOMINGO
Assistant City Administrator
(Administration)

2016
6/27/16

RODRIGO R. DUTERTE
City Mayor

PURCHASE REQUEST
PURCHASE REQUEST

CITY GOVT. OF DAVAO
LGU

| | | |
|--|-------------------------|--------------------------|
| Department: CMO/ANTI-DRUG ABUSE COUNCIL | PR No.: 1605-347 | Date: MAY 19 2016 |
| Section: _____ | SAI No.: _____ | Date: _____ |
| _____ | ALOBS No.: _____ | Date: _____ |

| Item No. | Quantity | Unit of Issue | Item Description | Estimated Unit Cost | Estimated Cost |
|----------|----------|----------------|--|---------------------|------------------|
| 3 | 1 | license | <p>CAT. 12 COMPUTER SOFTWARE</p> <p>MS Office Home and Business 2016 or latest with Word, Excel, PowerPoint, OneNote, Outlook, Full Package Product (FPP)</p> <p>"1. All quoted prices shall be inclusive of VAT 2. All quoted items shall be brand new. Indicate if whether genuine/original or replacement. 3. Indicate warranty, including its duration and other important terms and conditions."</p> <p>NEGOTIATED PROCUREMENT <i>53.9</i> SMALL VALUE PROC.</p> <p>BAC Res. No. 7003 S. 2014 dated 7/19</p> | 12,750.00 | 12,750.00 |
| | | | | Total | 80,750.00 |

"This is to certify that the items stated above are included in the Project Procurement Management Plan under page 2.

WILLIAM I. RAMIREZ
Action Officer
CADAC

[Signature]
ALEX O. MACARAEG
Administrative Officer IV

RODRIGO R. DUTERTE
City Mayor Office Use. **Page 2 of 2**

Purpose: _____

CONTROLLED & CHARGE TO: **9991-1**

FUND ACCT. CODE: **223**

NAME & SIGNATURE OF CONT. *[Signature]*

| | | | |
|--------------------|----------------------------------|----------------------------------|---------------------------|
| ATE: 6/6/16 | Requested by: | Cash availability | Approved by: |
| Signature: | | Controlled/Charged to: | |
| Printed Name: | | Fund Account Code: | |
| Designation: | ATTY. TRISTAN D. SANTIAGO | Controller: VILLAN DUREZA | RODRIGO R. DUTERTE |