Republic of the Philippines

Province of Negros Occidental

City of Talisay

REQUEST FOR QUOTATION

ABC: Php.86,000.00

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Quotation No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please quote your lowest price on the item/s listed below, subject to the General Condition on the last

Page, starting the shortest time of delivery and submit your quotation duly signed by your representative not later than \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in the return envelope attached herewith.

ARCHIBALD M. TUVILLA

General Services Officer

Note:

1. ALL ENTRIES MUST BE TYPEWRITTEN
2. DELIVERY PERIOD WITHIN \_\_\_\_\_\_\_\_\_\_\_\_ CALENDAR DAYS
3. WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPPLIES & MATERIALS AND ONE (1) YEAR FOR EQUIPMENT FROM DATE OF ACCEPTANCE BY THE CITY OF TALISAY
4. PRICE VALIDITY SHALL BE FOR A PERIOD \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CALENDAR DAYS
5. G-EPS REGISTRATION CERTIFICATE SHALL BE ATTACHED UPON SUBMISSION OF QUOTATION
6. BIDDERS SHALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATIONS

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ITEM NO. | DESCRIPTION | QTY. | UNIT | UNIT PRICE |  |
| 1 | AM Snacks:  Fettucini Con Tuna, Garlic Toast  and Iced Tea | 100 | Pax |  |  |
|  | Lunch:  Seafood Chowder, potato Salad, Sepo Guisado, Lengua Con Champignon | 100 | Pax |  |  |
|  | Snacks PM:  Village Burger and Bottled Water | 100 | pax |  |  |
|  | Meals for Budget Hearing of the Proposed Annual Budget of the City of Talisay |  |  |  |  |
|  | Xxxxxxxxxxxxnothing followsxxxxxx |  |  |  |  |
|  |  |  |  |  |  |

BRAND AND MODEL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DELIVERY PERIOD \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WARRANTY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRICE VALIDITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

After having carefully read and accepted your general conditions/I/We quote you on item.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRINT NAME AND SIGNATURE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel. No./Cellphone No. & Email Address