

REQUEST FOR QUOTATION

NAME OF SUPPLIER:

OFFICE ADDRESS :

QUOTATION NO.:

DATE PREPARED:

Please quote your lowest price on the item/s listed below, subject to the General Condition on the last page, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than _____.

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, one (1) year for equipment , from date of acceptance by the procuring entity.
4. Price validity shall be for a period of _____ calendar days
5. G-EPS registration certificate shall be attached upon submission of the quotation
6. Bidders shall submit original brochures showing certifications of the product being offered.

RANDY B. VILLARTE
Actg. Supervising Supply Officer

ITEM NO.	ITEM & DESCRIPTION	QTY	UNIT	PRICE/ UNIT	TOTAL AMOUNT
1	Supply, Delivery and Installation of Roll Up Blinds at 3rd Floor	1	Lot		
	Multi-Purpose GAD Hall, Administration Bldg, PMO ZDN:	includes:			
	220"x115" Combination Blinds	4	sets		
	158"x115" Combination Blinds	4	sets		
	158"x94" Combination Blinds	3	sets		
	95"x115" Combination Blinds	1	sets		
	189"x92" Combination Blinds	1	sets		
	158"x92" Combination Blinds	1	sets		
	XX				
	ABC:Php490000.00				

Brand and Model :

Warranty :

Delivery Period:

Price Validity:

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

PRINTED NAME/SIGNATURE

TEL NO. / CELLPHONE NO.

DATE

Canvassed by: _____

Date canvassed : _____