

Request for Quotation

PR # 2019-07-0718
 Date: 9/2/17

Company Name: _____
 Address: _____

Please quote your lowest price on the items / 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 _____ in the return envelope attached herewith


 REYNILO D. GARCIA
 PAC Chairman

- Note :**
- All entries must be typewritten.
 - Delivery Period within _____ calendar days upon receipt of Purchase Order.
 - Warranty shall be for a period of six (6) months for supplies and materials, one (1) year for Equipment, from date of acceptance by the procuring entity.
 - Price validity shall be a period of 30 calendar days.
 - G-EPIS Registration Certificate shall be attached upon submission of the Quotation.
 - Bidders shall submit Original Brochures showing certification of the product being offered (optional).
 - Mode of delivery: [] Pick-up (Schedule) [x] Door to Door Delivery

Item No.	Unit	ITEM AND DESCRIPTION	QTY.	UNIT PRICE	TOTAL AMOUNT
		Food (August 21, 2017- Wednesday)			
1.	pax	AM Snacks	125		
2.	pax	Packed Lunch	125		
3.	pax	PM Snacks	125		
4.	pax	Buffet Dinner	50		
5.	pax	Packed Dinner	100		
		Food (August 22, 2017- Thursday) - Opening			
6.	pax	Buffet Breakfast	150		
7.	pax	AM Snacks	250		
8.	pax	Packed Lunch	200		
9.	pax	Buffet Lunch	50		
10.	pax	PM Snacks	250		
11.	pax	Buffet Dinner	50		
12.	pax	Packed Dinner	100		
		Food (August 23, 2017 - Friday) - FFF			
13.	pax	Buffet Breakfast	150		
14.	pax	AM Snacks	275		
15.	pax	Packed Lunch	225		
16.	pax	Buffet Lunch	50		
17.	pax	PM Snacks	275		
18.	pax	Buffet Dinner	50		
19.	pax	Packed Dinner	100		
		Food (August 24, 2017 - Saturday) - RSRDH			
20.	pax	Buffet Breakfast	150		
21.	pax	AM Snacks	200		
22.	pax	Buffet Lunch	100		
23.	pax	Packed Lunch	100		
24.	pax	PM Snacks	200		
25.	pax	Buffet Dinner	50		
26.	pax	Packed Dinner	100		
		xxx nothing follows xxx			

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

Canvassed By: _____

Authorized Canvasser

Printed Name / Signature

Tel. No. / Cellphone No.

TIN No. of Establishment

Date