



Republic of the Philippines
AGRICULTURAL TRAINING INSTITUTE
 Regional Training Center XIII
 Los Angeles, Butuan City
 Mobile Nos. 09369010366/09293546355

REQUEST FOR QUOTATION

Date: **21 JUN 2024**
 Quotation #: **24-06-414**

Name of Company _____

Address _____

TIN No. _____

Please quote your best offer for the items/s described herein, subject to the Terms and Conditions provided, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than **28 JUN 2024** in the attached envelope and return it sealed.

Violeta T. Laguna
VIOLETA T. LAGUNA
 BAC Chairperson

ITEM No.	ITEM & DESCRIPTION	BRAND MODEL	UNIT	QUANTITY	UNIT COST	TOTAL COST
1	Catering services for National Rice Awareness Month (NRAM) 2024 celebration at Robinsons Place on November 7, 2024. Butuan City					
	serving two(2) snacks (AM & PM) and lunch		Pax	100		
	AM snack: Milk tea and Pizza					
	PM snack: Calamansi Juice and Burger					
	LUNCH : Grilled Tuna, Pork Caldereta, Fried Chicken					
	Dessert: Mango float					
	Drinks: Soft drinks (Plastic bottle)					
	Note: Packed meal using food grade material					
Purpose: Catering services for NRAM 2024 celebration at Robinsons Place Butuan City on November 7, 2024						
Requisitioner: Violeta T. Laguna						
Delivery date November 7, 2024						

24-06-509

ABC: 70,000.00
 Source of fund: Rice Program

- Note:
- All entries must be typewritten or legibly written in ink.
 - Warranty shall be for a period of six (6) months for supplies & materials, one (1) year for equipment from date of acceptance by procuring entity.
 - Price validity shall be for a period of _____ calendar days
 - Documentary requirements to be submitted along with your quotation:
 - 1 PhilGEPs Registration Number/Certificate
 - 2 Mayor's/Business Permit
 - 3 Income/Business Tax Return
 - 4 Omnibus Sworn Statement - Duly Notarized - form can be downloaded in the ATI-RTCI3 website
 - 5 PCAB Lic. (Infra) if applicable

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

Signature over Printed Name of Company Owner or Authorized Representative

Date: _____
 Cellphone No. _____
 email Address: _____

 Name and Signature of Conasser