Department of Agriculture AGRICULTURAL TRAINING INSTITUTE **REGIONAL-TRAINING CENTER-VII CENTRAL VISAYAS** Beside City Park, Cabawan District, Tagbilaran City Mobile No: 09173218524 Email add: ati7.philgeps@gmail.com **REQUEST FOR QUOTATION**

		Date: RFQ No.		
Name of Company: Address: Business Permit No:		Tin No:	VAT	Non-VAT
Please quote your lowes by you or your represen	•	low, subject to the General Conditior	ns stated belov	w, and submit your quotation duly signed
2 PRIC PLE	CES SHOULD BE INCLUSIVE OF VAT. CE VALIDITY SHALL BE FOR A PERIO ASE ATTACH TOGETHER WITH YOU HOPPING	-	DWING:	

-MAYOR'S/BUSINESS PERMIT -PHILGEPS REG. NUMBER (for 50k & above, if registered) **II. SMALL VALUE PROCUREMENT**

3 -MAYOR'S/BUSINESS PERMIT -OMNIBUS SWORN STATEMENT (for ABCs above 50k) -PROFESSIONAL LICENSE/CV (for Consulting Services) -FOR COOPERATIVE (Certificate of Compliance, Menu) -PHILGEPS REG. NUMBER (for 50k & above, if registered) -ITR (for ABC above 500K) -PCAB (for infrastructure)

REFERENCE GPPB RES. NO. 21-2017 DATED 30 MAY 2017

4 MANAGEMENT RESERVES THE RIGHT TO REJECT OUTRIGHT ANY CONTINGENT BIDS.

5 BID PRICES SHOULD BE VALID 45 DAYS FROM THE DATE OF QUOTATION

MA. GRACIA SOLIVA-PUNGAY

BAC Chairman

After having carefully read and accepted the General Conditions, I/we submit our quotation/s for the item/s as follows:

ITEM NO.	QTY.	UNIT	ITEM AND DESCRIPTION	UNIT PRICE	Total
	35	рах	Food (3 meals and 2 snacks) for 3 days		
			TOTAL:		
PUR	PURPOSE: For the conduct of Training on Native Chicken Production and Management Batch 1 on April 9-11,2024 at Neg Oriental.			ent Batch 1 on April 9-11,2024 at Negros	

Printed Name /Signature (Supplier/Dealer)

Telephone No. / Cellphone No. / Email Address