## 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 Compa	any:				
Address:					
Business Permi	t No:Tir	n No:	VAT	Non-VAT	
Please quote you by you or your re	or lowest offer for the item/s described below, subject epresentative.	to the General Conditions st	ated below,	and submit your quotation duly signed	t
General Condition	ns:				
	1 PRICES SHOULD BE INCLUSIVE OF VAT.				
	2 PRICE VALIDITY SHALL BE FOR A PERIOD OF 60 CALI PLEASE ATTACH TOGETHER WITH YOUR QUOTATIO I. SHOPPING		NG:		
	-MAYOR'S/BUSINESS PERMIT	-PHILGEPS REG. NUMBER (fo	r 50k & above,	, if registered)	
	II. SMALL VALUE PROCUREMENT				
	3 -MAYOR'S/BUSINESS PERMIT	-PHILGEPS REG. NUMBER (fo	r 50k & above,	, if registered)	
	-OMNIBUS SWORN STATEMENT (for ABCs above 50k)	-ITR (for ABC above 500K)			
	-PROFESSIONAL LICENSE/CV (for Consulting Services) -FOR COOPERATIVE (Certificate of Compliance, Menu)	-PCAB (for infrastructure)			
	REFERENCE GPPB RES. NO. 21-2017 DATED 30 MAY 2017				
	4 MANAGEMENT RESERVES THE RIGHT TO REJECT OF	UTRIGHT ANY CONTINGENT	BIDS.		
	5 BID PRICES SHOULD BE VALID 45 DAYS FROM THE D	DATE OF QUOTATION			
		N	1A. 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
			Day 1 & 3		
	5	pax	Breakfast and Dinner		
	40	pax	Lunch, AM & PM snacks		
			Day 2		
	5	pax	Breakfast and Dinner		
	40	pax	AM & PM snacks		
	70	pax	Lunch		
			Food:		
			with appetizer		
			at least 3 main dishes		
			with dessert/ fruits		
			with drinks		
			Supplier should include the Menu together with the Quotation		
			TOTAL:		
PUR	POSE:		echnical Breifing on Chicken Production and Man sland, Cebu.	I	ıly 16-18, 2024 at Mercedes Gym, Poro,

Printed Name /Signature
(Supplier/Dealer)
Telephone No. / Cellphone No. / E-

Telephone No. / Cellphone No. / Email Address