



Republic of the Philippines
 Department of Agriculture
AGRICULTURAL TRAINING INSTITUTE
 ATI Building, Elliptical Road, Diliman, Quezon City, Metro Manila 1100
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REQUEST FOR QUOTATION

DATE: 07/11/2023

PURCHASE REQUEST NO.: CDMD FUND 2023-07-35

CANVASS NO. 30

Gentlemen:

Please quote your lowest price, taxes included, and subject to the terms and conditions that you may encounter purposely for article (s) and/or service(s) enumerated below, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than _____ in the return envelope attached here with.

Very truly yours:


EDITHA S. VINUYA

BAC Chairman

ITEM NO.	QTY	UNIT	ITEM AND DESCRIPTION	UNIT PRICE	TOTAL
	250	set	<p>Notarial Service Notarial Service of Scholarship Contracts for EAsY Agri Batch 3 Scholars</p> <p>Include: Pick up and delivery of notarized contracts from and to ATI Central Office (by batch)</p> <p>Note: Notarized contracts must be delivered to ATI Central Office one (1) day upon notarization</p>		
PURPOSE:					
To notarize the scholarship contracts of the program applicants of the EAsY Agri Batch 3.					
Pls. submit the following eligibility documents:					
<input checked="" type="checkbox"/> Mayor's/Business Permit <input type="checkbox"/> Income Tax Return <input type="checkbox"/> Notarized Omnibus Sworn Statement <input checked="" type="checkbox"/> PhilGEPS Registration Number/Red Membership <input type="checkbox"/> Certificate of Sole Distributorship					
Note: Pls. provide also the following: contact information such as email address and mobile/landline numbers; Tax Identification Number and Bank Details					

I hereby certify that I am in the position to furnish the above article(s), service(s) at the prices and in quantities as called for except as I have indicated. The articles are available in our stock for immediate delivery to the Agricultural Training Institute, Elliptical Road, Diliman, Quezon City

MODEL: _____

DELIVERY PERIOD: _____

WARRANTY PERIOD: _____

PRICE VALIDITY: _____

CANVASSED BY: _____

DATE: _____

 Signature Over printed name of proprietor/Manager
 or Authorized Representative