



REQUEST FOR QUOTATION

DATE: 02/19/2024

PURCHASE REQUEST NO.: PAD (RBO) FUND 2024-02-05

CANVASS NO. 02

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:

MILAGROS C. URBANO

BAC Chairman

ITEM NO.	QTY	UNIT	ITEM AND DESCRIPTION	UNIT PRICE	TOTAL
	100	servings	Meals Breakfast - 3 viands choices of vegetables, fish meat-chicken/ pork/beef with soup, rice, dessert, fresh fruit juices and bottled water (buffet)		
	100	servings	AM Snacks - Light serving choices of cakes , local delicacies, pasta, sandwiches and fresh fruit juices		
	100	servings	Lunch - 3 viands choices of vegetables, fish meat-chicken/ pork/beef with soup, rice, dessert, fresh fruit juices and bottled water (buffet)		
	100	servings	PM Snacks - Light serving choices of cakes , local delicacies, pasta, sandwiches and fresh fruit juices		

PURPOSE:

To be served during the Filipino Food Month (FFM) on April 30, 2024 at the ATI-Central Office, Elliptical Road, Diliman, Quezon City.

Pls. submit the following eligibility documents:

- Mayor's/Business Permit
- Income Tax Return
- Notarized Omnibus Sworn Statement
- PhilGEPS Registration Number/Red Membership
- 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



8:28 PPD