



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: 03/19/2024

PURCHASE REQUEST NO.: ISD FUND 2024-03-20

CANVASS NO. 15

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
	2	license	Renewal of Articulate 360 Teams Plan Subscription Annual subscription (12 months) Inclusive of: Course authoring apps (Rise 360, Storyline 360, Studio 360, Replay 360, and more) Stock Content Review App Storyline 360 Team Slides Rise 360 collaboration Team Administration Seat Management Unlimited Storage Success Team Health Checks Priority email support Live and on-demand online training		

PURPOSE:

To be used by ATI Central Office and Training Centers Staff in the Development of eLearning Courses.

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: _____

Signature Over printed name of proprietor/Manager
or Authorized Representative

CANVASSED BY: _____

DATE: _____