Form Title : Request for Quotation

Location of the Project: CITY ACCOUNTANT

Date:
Quotation No. __ 200-2022-11-013
11/11/2022

_____

_____

Please quote your lowest price on the item/s listed below, subject to the General Conditions on the last page, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than _____ in the return envelope attached herewith.

JOCELYN E. CANTRE
General Services Officer

Note:

1. ALL ENTRIES MUST BE TYPEWRITTEN
2. DELIVERY PERIOD WITHIN _____ CALENDAR DAYS
3. WARRANTY SHALL BE FOR THE PERIOD OF SIX (6) MONTHS FOR SUPPLIES & MATERIALS, ONE (1)
4. PRICE VALIDITY SHALL BE FOR A PERIOD OF _____ CALENDAR DAYS
5. BIDDERS SHALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATIONS OF THE PRODUCT BEING OFFERED

QTY.	UNIT	DESCRIPTION	UNIT PRICE	AMOUNT
		VENUE WITH MEALS		
74	packs	**LUNCH**		
		Beef with Brocoli		
		Chicken Hongkong style		
		Pork Hamonado		
		Blue Marlin steak w/ Mushroom Sauce		
		Buko Salad		
		Iced Tea		
74	packs	**PM SNACKS**		
		Spaghetti		
		Loaf bread		
		Softdrinks		

Brand and Model : _____
Delivery Period : _____
Warranty : _____
Price Validity : _____

After having carefully read and accepted your General conditions, I/We quote you on the item at price noted above.

_____
Printed Name/Signature