



Republic of the Philippines
 Department of Agriculture
MINDANAO INCLUSIVE AGRICULTURE DEVELOPMENT PROJECT
 Regional Project Coordination Office - Caraga Region
 Capitol Site, Butuan City
 Tel. No: (085) 342-4092 Telefax No.: (085) 341-2114

REQUEST FOR QUOTATION

Date: _____
 Quotation #: _____

 Name of Company

 Address

 TIN No.

Please quote your lowest price in the items/s listed below, subject to the General Conditions below, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than _____ in sealed envelope marked w/ the reference no. (PR #: 23-12-050-MT)

Rene O. Morales
ENGR. RENE O. MORALES
 Chairman, Special Bids and Awards Committee

| ITEM No. | ITEM & DESCRIPTION | UNIT | QUANTITY | UNIT COST | TOTAL COST |
|---------------------|---|------|----------|-----------|------------|
| 1 | OFFICE TABLES (melamine scratch proof) 3 drawers with safety lock 1 pull-out drawer with safety lock Well designed handles 100cm x 49cm x 76cm | pcs | 23 | ✓ | |
| 2 | OFFICE CHAIRS (Ergonomic) -mesh cloth, 360 degrees swivel Chrome plated starbase, adjustable height | pcs | 23 | | |
| 3 | Office File Drawer 4D Vertical, Steel Filing Cabinet | unit | 12 | | |
| 4 | Office File Drawer 3D Vertical, Filing Cabinet Centralized lock | unit | 1 | | |
| 5 | Monoblock Chair, White | pcs | 6 | | |
| GRAND TOTAL: | | | | | |

EPC: _____ **₱383,605.00**
 Source of fund: _____ **MIADP**

Terms and Conditions:

1. All entries must be typewritten/printed in ink.
2. Delivery period within 30 calendar days.
3. Warranty shall be for a period of six (6) months for supplies & materials, one (1) year for equipment from date of acceptance by procuring entity.
4. Price validity shall be for a period of 20 calendar days
5. PhilGEPS Registration Certificate shall be attached upon submission of the quotation if applicable.
6. Bidders shall submit original brochures showing certification of the products being offered.
7. Winning bidder(s) from outside Butuan City must appear personally or sent authorized representative to sign contract and claim payments.

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

 Printed Name/Signature of Company

 Name and Signature of Conasser

 Tel. No. / CP No. / email address

 Date