

## Republic of the Philippines

## DEPARTMENT OF AGRICULTURE

## Caraga Region

Capitol Site, Butuan City

Tel. No: (085) 815-2009/ (085)342-4092/Fax No.: (085) 341-2114

Email add: dacaraga@yahoo.com

## REQUEST FOR QUOTATION

Name of Company  Address  TIN No.  Please quote your lowest price inclusive of taxes in the items/s listed, subject to the General Conditions below, stating the shortest time of delivery. Submit your quotation duly signed by your representative not later than Philippen in sealed envelope marked with the reference no. (PR #						Date:	
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Item ITEM AND DESCRIPTION Brand/ Model Unit Quantity Unit Cost Total Cost No.   Item No.	stating !	Please quote your lowest price inclusive of taxes in the items/s listed, s					
TEM_No.   TEM_AND DESCRIPTION   Brand/   Model   Unit   Quantity   Unit Cost   Total Cost			).	4	JOHNY M	TO TO	
No.   THEM AND DESCRIPTION   Model   Ont   Quantity   Unit Lost   Total Lost				Chair	an, Bigs and	Awards Comm	ittee
AR, 1000 tablets/can, expiration date: ≥2025  2 Kjeltabs, selenium tablets with 3.5g K2S04+3.5 mg Se, AR, 1000 tablets/can, expiration date: ≥2025  - xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx		ITEM AND DESCRIPTION	100 Y 20 100 M	Unit	Quantity	Unit Cost	Total Cost
1000 tablets/can, expiration date:>2025 -XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	1			bottle	1		
ABC: P60,000.00  Source of Fund: ILD/RSL  General Conditions:  1. All entries must be typewritten/printed in ink. 2. Delivery period within calendar days based on the contract. 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 calendar days 5. PhilGEPS Registration Certificate, Business Permit, DTI Certificate and Tax Registration Certificate shall be attached upon submission of the quotation, if applicable. 6. Bidders shall submit original brochures showing specification of the products being offered. 7. Winning bidder(s) from outside Butuan City must appear personally or sent authorized representative to signed contract and claimed 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 Representative  Name and Signature of Canvasser  Tel.No/Cp No/email address	2			bottle	1		
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Date	Name and Signature of Canvasser			Tel.No./Cp No./email address			
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