



Republic of the Philippines
DEPARTMENT OF AGRICULTURE

Regional Field Office XIII
Capitol Site, Butuan City

Tel. No: (085) 342-4092; Telefax No.: (085) 341-2114

Email add: ored.dacaraga@gmail.com; Website: www.caraga.da.gov.ph

REQUEST FOR QUOTATION

Date: _____
Quotation #: _____

Name of Company _____

Address _____

TIN No. _____

Please quote your lowest price inclusive of taxes the items/s listed below, subject to the General Conditions below, stating the shortest time of delivery. Submit your quotation duly signed by your representative not later than _____ in sealed envelope market with the reference no. (PR#: 24-02-SP102).


JOHN M. CONCON

Chairman, Bids and Awards Committee

ITEM No.	ITEM & DESCRIPTION	UNIT	QTY	UNIT COST	TOTAL COST
	Catering Services for the SAAD Quarterly Meeting				
	Venue:DA Conference Hall,Butuan City				
	March 26, 2024				
	Breakfast:Rice,Hotdog,Pork Tocino,Fresh Fruits and Coffee/Milk	Pax	10		
	AM Snacks:Ensaymada and Canned Fruit Juice	Pax	40		
	Lunch:Rice,Chicken Adobo,Sweet & Sour Pork,Vegetable Four Seasons,Fresh Fruits (Pineapple and Water Melon) and Fruit Juice	Pax	40		
	PM Snacks:Banana Cake and Fruit Juice	Pax	40		
	May 27, 2024				
	Breakfast:Rice,Scrambled Egg,Hotdog,Fresh Fruits and Coffee/Milk	Pax	10		
	AM Snacks:Cheese Burger and Canned Fruit Juice	Pax	40		
	Lunch:Rice,Pork Sisig,Fried Chicken,Vegetable Lumpia,Mango Tapioca and Fruit Juice	Pax	40		
	PM Snacks:Kakanin (Biko) & Sikwate	Pax	40		
	Terms & Conditions:				
	*With Free flowing coffee and water				
	Payment shall be done after every activity				

ABC: **121,800.00**

Source of fund: _____

Note:

1. All entries must be typewritten/printed in ink.
2. Delivery period within _____ 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
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 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. / Cellphone No. /Email address _____

Date _____



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JOHNNY M. CONCON

Chairman, Bids and Awards Committee

ITEM No.	ITEM & DESCRIPTION	UNIT	QTY	UNIT COST	TOTAL COST
	Catering Services for the SAAD Quarterly Meeting				
	Venue:DA Conference Hall,Butuan City				
	August 19, 2024				
	Breakfast:Rice,Corned Beef with Patatas,Dried Fish (Dilis),Fresh Fruits (Banana) and Coffee/Milk	Pax	10		
	AM Snacks:Special Mamon and Canned Fruit Juice	Pax	40		
	Lunch:Rice,Buttered Chicken,Sinuglaw,Vegetable Lumpia,Mango Float and Canned/Bottled Juice	Pax	40		
	PM Snacks:Choco Moist Cake & Bottled Water	Pax	40		
	November 25, 2024				
	Breakfast:Rice,Corned Beef with Patatas,Dried Fish (Dilis),Fresh Fruits (Banana) and Coffee/Milk	Pax	10		
	AM Snacks:Cassava Cake and Canned Fruit Juice	Pax	40		
	Lunch:Rice,Buttered Chicken,Sinuglaw,Vegetable Lumpia,Mango Tapioca and Canned/Bottled Juice	Pax	40		
	PM Snacks:Empanada and Canned Fruit Juice	Pax	40		
	Terms & Conditions:				
	*With Free flowing coffee and water				
	Payment shall be done after every activity				

ABC: **121,800.00**

Source of fund: _____

- Note:
1. All entries must be typewritten/printed in ink.
 2. Delivery period within _____ 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
 4. Price validity shall be for a period of _____ calendar days
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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 Convasser _____

Tel. No. / Cellphone No. /Email address _____

Date _____