



**REQUEST FOR QUOTATION**

Date: \_\_\_\_\_  
 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 3 days upon receipt in sealed envelope marked with the reference no. (PR # 24-05-RMDC).

*For:*   
**ABEL F. WAGAS**

Chairman, Bids and Awards Committee

ITEM No.	ITEM & DESCRIPTION	BRAND MODEL	UNIT	QUANTITY	UNIT COST	TOTAL COST
<b>Lot 2</b>	<b>Year-End Assessment</b>					
Venue :	Butuan City					
Date :	November 26-27, 2024					
Menu						
<b>DAY 1</b>						
AM Snacks	Special Biko or puto maya & Juice		pax	38		
Lunch	Rice, Pork Barbeque, Garlic Butter Shrimp, Salad Talong, Dessert, Drinks		pax	38		
PM Snacks	Banana Fritters & Juice		pax	38		
Dinner	Rice, Pork Nilaga, Fish Escabeche, Pancit Guisado, Fruits		pax	38		
<b>DAY 2</b>						
AM Snacks	Tuna or Ham Sandwich & Buko Juice		pax	38		
Lunch	Rice, Pork Binagoongan, Kinilaw, Garden Salad, Fruits & Drinks		pax	38		
PM Snacks	Kakanin & Canned Juice		pax	38		
	<i>*free flowing coffee</i>					

ABC: Lot 2 : 57,000.00

Source of fund: MOP GAA 2024

**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.

\_\_\_\_\_  
 Signature over Printed Name of Authorized Representative

\_\_\_\_\_  
 Signature over Printed Name of Convasser

\_\_\_\_\_  
 Tel. No. / CP No. / email address

\_\_\_\_\_  
 Date



Republic of the Philippines  
DEPARTMENT OF AGRICULTURE  
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 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 3 days upon receipt in sealed envelope marked with the reference no. [PR # 24-05-AM-055].

  
**ABEL F. WAGAS**  
Chairman, Bids and Awards Committee

ITEM No.	ITEM & DESCRIPTION	BRAND MODEL	UNIT	QUANTITY	UNIT COST	TOTAL COST
	Provision of Food, Venue and Billeting for the Conduct of					
	AMAD-LGU 2024 Mid-Year & Year-End Assessment & Planning					
	Workshop					
	<b>Lot 1 AMAD Mid-Year Assessment</b>					
	Venue : Surigao del Sur					
	Date : June 27-28, 2024					
	Menu					
	<b>DAY 1</b>					
	AM Snacks Banana Cake & Fresh Juice		pax	38		
	Lunch Rice, Pork Nilaga, Fish Kinilaw, Vegetable Salad, Fruit & Drinks		pax	38		
	PM Snacks Assorted Kakanin & Sikwate		pax	38		
	Dinner Rice, Pork Menudo, Grilled Fish, Guso Salad, Fruits		pax	38		
	Billeting		pax	38		
	<b>DAY 2</b>					
	Breakfast Rice, Sotanghon Guisado, Tortang Talong		pax	38		
	AM Snacks Calamansi Juice & Mini Burger		pax	38		
	Lunch Rice, Buttered Shrimp, Crispy Pork Belly, Garden Salad, Fruits & Drinks		pax	38		
	PM Snacks Pizza & Canned Juice		pax	38		
	*free flowing coffee					

ABC: Lot 1: 91,200.00  
Source of fund: MOP GAA 2024

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- Price validity shall be for a period of \_\_\_\_\_ calendar days
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Signature over Printed Name of Authorized Representative

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Signature over Printed Name of Convasser

\_\_\_\_\_  
Tel. No. / CP No. / email address

\_\_\_\_\_  
Date