

## DEPARTMENT OF AGRICULTURE

Caraga Region

Capitol Site, Butuan City

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

## REQUEST FOR QUOTATION

ating th	Address					
ating th						
ating th	TIN	-				
ating th	Please quote your lowest price land					
	Please quote your lowest price inclusive of taxes in the items he shortest time of delivery. Submit your quotation duly signe envelope marked with the reference po. (DR #	/s listed, sub	ject to the G	ieneral Co	nditions below,	
sealed	envelope marked with the reference no. (PR #	g by your rep	resentative	not later	than	
		-/-		6	mil	
				A	EL F. WAGAS	830
NO.	ITEM & DESCRIPTION		C	hairman,	Bids and Awards	Committee
		BRAND	UNIT	QTY	UNIT COST	TOTAL COS
1	Avian Influenza A Virus Antibody		late.			1772 50.
-	Test Mic ELISA		kit	2		
>	>5 plates x 96 wells, sample diluent buffer >conjugates, wash solution, substrate	TO DE				
>	stop solution, controls			11.12	1000	100
	- Controls					- Internal
D	Delivery at ILD-RADDL, Taguibo, Butuan City					
IN	lotes: Kits at least 1 year expiration date from the delivery time					10000
	Conforms to BAI Protocol					
-						
				ABC: 120, 000.00		
eneral Conditions:			Source	Source of fund: Livestock		stock
1.7	All entries must be typewritten/printed in ink.					
	Delivery period within calendar days based on th	e contract.				
	Warranty shall be for a period of six (6) months for supplies &	materials, on	e (1) year fo	ır		
	Price validity shall be a					
5. P	PhilGEPS Registration Certificate, Business Permit, DTI Country	5				
atta	PhilGEPS Registration Certificate, Business Permit, DTI Certificate, Business Permit, DTI Certificate, achieved upon submission of the quotation, if applicable.	te and Tax Re	egistration (	Certificate	shall be	
0. B	lidaers shall submit original brochures showing specification of	f the need				
	Tom buiside buttian Lity must appear person	nally or sent	s being offer	ed.		
SI	igned contract and claimed payments.	y or sem t	rathonzea n	epresenta	tive to	
	delete in the second of			Printed Name/Signature of Company		
Name and Signature of Canvasser			_	Tel. No. / CP No. / email address		