	of the Philippines CORPORATION		
ndard Form Number: SF-GOOD-60 vised on: January 08, 2018	APPROVED		
ndard Form Title: Request For Quotation	FOR		
npany Name:	Date:		
iress:	Quotation No.: 2025070400209		
IGEPS Reg. No.			

L
JUSANNEIV. SALVADOR
SUPPLY OFFICER II
JUSANSALVADOR@YAHOO.COM
Tel/Fax No.: (02) 8817-3168

General Conditions:

1. All entries must be typewritten/accurate/readable.

2. Delivery period must be within seven (7) calendar days only.

submit your quotation duly signed by your representative not later than ______, 2025.

3. Warranty shall be for a period of six (6) months for supplies and materials, one (1) year for equipment, from the date of acceptance by the Procuring Entity.

4. Price validity must be within thirty (30) calendar days.

5. Bidders must submit Certificate of PhilGEPS registration, updated Business Permit?Mayor's Permit, Notarized Omnibus Sworn Statement (for ABC's above 50k), and Income or Business Tax Return for ABC's above 500k.

6. Bidders shall submit original brochures showing specifications of product being offered.

7. According to BIR Revenue Regulatios No. 017-2024, the final settlement requires the presentation of an updated BIR tax clearance. Non-submission of a tax clearance entitles SHFC to suspend payment for any goods or services delivered.

(FAILURE TO DO SO WILL MEAN DISQUALIFICATION OF YOUR BID PROPOSAL.)

Item No.	Item and Description		QTY	Approved Budget (In Php)	BID Price
A-000-053	Documentary Storage Box-Box: 400 x 275 x 285 mm; Cover: 410 x 55 x 295 mm, color: blue		500	150,000.00	
A-000-113	Plastic Jacket-with tab, size: legal, PVC material: gauge no. 8, packaging: 100s per pack		2,000	30,000.00	
	Place of Delivery:	8737 BDO PLAZA PASEO DE ROXAS MAKATI CITY		180,000.00	
	Delivery Term:	FOB Destination			
	Term of Payment:	15 working days upon complete delivery			

Brand and Model:

Delivery Period:

Warranty:

PriceValidity:

Payee's Name & TIN:

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

Printed Name / Signature

Tel. No. / Cellphone No

E-mail Address

Date