Kaagapay ng Komunidad sa Maginhawang Pamumuhay

![BALAI FILIPINO Communities]

Standard Form Number: SF-GOOD-60
Revised on: January 08, 2018
Standard Form Title: ***Request For Quotation***

Company Name: _____	Date: _____
Address: _____	Quotation No.: 2023101800820
PhilGEPS Reg. No. _____	

       Please quote you lowest price on the item/s listed below, subject to the General Conditions, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than _____, 2023.

MARY GRACE D. MANGAO

DATA ENCODER

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.
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. All bid proposals must be VAT inclusive.
(FAILURE TO DO SO WILL MEAN DISQUALIFICATION OF YOUR BID PROPOSAL.)

Item No.	Item and Description	QTY	Approved Budget (In Php)	BID Price
A-000-660	4-Drawer Vertical Cabinet-Full drawer externsion on steel ball bearing telescoping slides; all units featuer anti-tipping drawer interlock system that allows only one drawer open at a time; counter weight included to meed ANSI	8	84,000.00	
	Place of Delivery: SHFC DAVAO OFFICE **Delivery Term:** FOB Destination **Term of Payment:** Check on Delivery		**84,000.00**	

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