

Kaagapay ng Komunidad sa Maginhawang Pamumuhay



Standard 1	Form Number: S	SF-GOOD-60			
Revised o	n: January 08, 2	018			
Standard 1	Form Title: Req	uest for Quotation			
			Date	:	
			Quot	ation No	
Company	Name:				
Address:_					
ΓΙΝ Num	:				
_					
		ur lowest price on the item/s lis			
_		of delivery and submit your quotat	tion duly signed	by your representative	e not later
han	, 202	22.			
			9		
				V. SALVADOR	
			Procurement		
			Tel/fax. No.		
			jusansalvado	or@yahoo.com	
General	1.	All entries must be typewritten	n/accurate/readab	le.	
Condition	s: 2.	Delivery period must be within	n seven (7) calend	dar days only.	
	3.	Warranty shall be for a period	d of six (6) mont	ths for supplies and	materials, one (1)
		year for equipment, from the date	e of acceptance b	y the Procuring Entit	ty.
	4.	Price validity must be within the	hirty (30) calenda	ar days.	
	5.	Bidders must submit Cert	tificate of Phi	IGEPS registrati	on & Business
		Permit or Mayors Permit			
	6.	Bidders shall submit original	brochures show	ving specifications	of product being
		offered.			
	FAI	LURE TO DO SO WILL M	EAN DISQU	ALIFICATION (OF YOUR BID
	PRO	POSAL.			
Item				Approved	
No.	l It	em and Description	Qty	Budget Total	BID PRICE
110.				Cost	
		A, Black, genuine	2	20,000.00	
2		A, Cyan, genuine	2	20,000.00	
)	LID Towar 500	A Maganta ganging	2	20,000,00	

Item No.	Item and Description	Qty	Approved Budget Total Cost	BID PRICE
1	HP Toner 508A, Black, genuine	2	20,000.00	
2	HP Toner 508A, Cyan, genuine	2	20,000.00	
3	HP Toner 508A, Magenta, genuine	2	20,000.00	
4	HP Toner 508A, Yellow, genuine	2	20,000.00	
5	HP Toner 37A, Black, genuine	3	28,407.00	
	Place of Delivery : MAKATI CITY		108,407.00	
	Delivery Term: FOB Destination			

Brand and Model	:	
Delivery Period	:	
Warranty	:	
Price Validity	:	
Payee's Name	:	

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

Tel. N	lo. / Cellphone No.
e-mai	l address