

Request for Quotation

Date: Feb. 07, 2025
PR #: 416715

Please quote your lowest price on the item/s listed below stating the shortest time of delivery and submit/fax/email your quotation duly signed by your representative not later than _____.

THE PROJECT WILL ONLY BE AWARDED TO PLATINUM REGISTERED PHILGEPS SUPPLIERS FOR COMPETITIVE BIDDING AND TO AT LEAST RED MEMBER REGISTERED SUPPLIERS TO ALTERNATIVE MODE OF PROCUREMENT. TO REGISTER, KINDLY CLICK THE LINK <https://www.philgeps.gov.ph/Suppliers/add>

QTY	UNIT	ITEM DESCRIPTION/SPECIFICATION	UNIT PRICE	TOTAL AMOUNT
3	cs	BROTH, BEEF 1.5KG (6PCS/CASE)		
4	cs	BROTH, CHICKEN 1.GKG (6PCS/CASE)		
5	cs	DRESSING, CAESAR SALAD 1L/6		
2	cs	DRESSING, THOUSAND ISLAND 1L/6		
9	cs	LIQUID SEASONING 130ML (24PCS/CASE)		
2	cs	LIQUID SEASONING 1L/6		
15	cs	MAYONNAISE 5.5L (2PCS/CASE)		
6	cs	PEANUT BUTTER 1KG (6PCS/CASE)		
11	cs	SAUCE, OYSTER 3.6KG (4PCS/CASE)		
6	cs	SEASONING, CHICKEN ROSTIP HERBS & SPICES 1KG (10PCS/CS)		
3	cs	SOUP, CRAB AND CORN (60PCS/CASE)		
5	cs	SOUP, CREAM OF CORN 1KG (6PCS/CASE)		
5	cs	SOUP, CREAM OF MUSHROOM 1KG (6PCS/CASE)		
5	cs	TEA, YELLOW LABEL (12 X 100S X 2G)		

ABC PHP: 251,550.00

- NOTE:**
1. ALL ENTRIES MUST BE CLEAR AND READABLE.
 2. DELIVERY PERIOD WITHIN 7 CALENDAR DAYS UPON PO CONFORME.
 3. WARRANTY SHALL BE ATLEAST SIX (6) MONTHS FOR SUPPLIES & MATERIALS, ATLEAST ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY THE PROCURING ENTITY.(if applicable)
 4. PRICE VALIDITY SHALL BE FOR A PERIOD OF 90 CALENDAR DAYS.
 5. PhilGEPS REGISTRATION CERTIFICATE SHALL BE ATTACHED/FAX/EMAILED UPON SUBMISSION OF THE QUOTATION (IF EXPIRED OR DAP HAS NO FILE).
 6. TERMS OF PAYMENT 30 DAYS AFTER DELIVERY OF ITEM/S OR FINAL ACCEPTANCE.
 7. TOGETHER WITH YOUR QUOTATION/PROPOSAL, ATTACHED YOUR COMPANY'S BIR 2303, PHILGEPS CERTIFICATE, MAYOR'S/BUSINESS PERMIT ITR(FOR ABCs above 50k) OMNIBUS SWORN STATEMENT (FOR SVP WITH ABCs above 50k)

I/We quote you on the item/s at prices noted above.



development academy of the philippines

Printed Name / Signature; Date

Tel. No. / Cellphone No. : _____

E-mail address: _____

Name of supplier: _____