REQUEST FOR QUOTATION

Name of Address		hment:		- -	
Sir/Mada	am:				
Please quote your lowest price on the item/s listed below, subject to the general condition below stating the shortest time of delivery and submit your quotation duly signed by your representative not later than 99 September 2020 in the returned envelope attached herewith: MILAGROS C. ADDURU Chair, Regional Bids and Awards Committee					
Qty.	UOM	ITEM AND DESCRIPTION	Approved Budget for the Contract	PER UNIT	Bid Amount TOTAL
1,000 600	piece piece	Procurement of Cello uring the 2020 Census of Population and Housing (202) Cellcards Globe Cell Cards Smart Cell Cards		in the Provi	nce of Cagayan PhP
Note: - Price Inclusive of VAT			Delivery Period: Warranty: Price Validity		
Afte	er having	carefully read and accepted your General Conditions, I/We		·	
CONRADS A DECENA Carryasser			Printed Name/Signature Tel. No./Cellphone No.		