

## **REQUEST FOR QUOTATION**

Name of Establishment: Address:						
Sir/Mada	am:					
		e your lowest price on the item/s listed below, subject to the general condigned by your representative not later than <b>01 December 2020</b> in the return	ed envelope attached here	ewith:	delivery and submit your	
				ROS C. ADD	JURU	
	Chair, Regional Bids and Awards Committee					
Qty.	UOM	ITEM AND DESCRIPTION	Approved Budget for		Bid Amount	
		SUPPLY AND DELIVERY OF COVID-19 RESPONSE	the Contract ITEMS FOR PHILSYS US	PER UNIT   SE	TOTAL	
IN THE PHILIPPINE STATISTICS AUTHORITY-PROVINCIAL STATISTICS OFFICE OF CAGAYAN (MUNICIPALITY OF GATTARAN)						
152	bottle	ALCOHOL, ethyl, 70%, 500ml				
48	bottle	ALCOHOL, ethyl, 70%+ pure IPA, 330 ml, with sprayer, ideal for electronics cleaning and flux thinning, plastic safe, non-ozone depleting				
2508	piece	GLOVES, NITRILE Disposable, Non-Sterile, Latex, Powder-Free, Ambidextrous, Rolled Bead Cuff, Finger Textured				
1254	piece	SURGICAL MASK, DISPOSABLE, Medical Device Class 1, Earloop, 3-ply, Wired				
12 76		Hand Soap, 750ml Hand Sanitizer, 100ml				
9	piece	Foot Bath with Disinfectant				
			70,992.50			
				TOTAL		
<ol> <li>Note: 1. Delivery period is within 10 calendar days from receipt of the Notice to Proceed (NTP)</li> <li>2. Supplier must state and/or indicate the brand and warranty of each item/product (if applicable) being offered</li> <li>3. Prices and specifications for the bid should be valid for 60 days</li> <li>4. No payment shall be made until full delivery of item/s is/are completed. A penalty of 1/10 of 1% of each day of delay in the delivery shall be improved</li> <li>5. Prices inclusive of VAT</li> </ol>						
Afte	er having	carefully read and accepted your General Conditions, I/We quote you on the	he item at prices noted abo	ove.		
			F	Printed Name/Signature		
Tel. No./Cellphone No.						
CONRADO A DECENA  Canvasse				Date		