BID FORM

Item/s and specification/s (minimum)	Unit	Qty.	*Approved Budget Cost (ABC)*	**Unit Price** *(in Peso) Please indicate your offer/price here.*	**Total Amount (VAT inclusive)**	**Compliance with Technical Specifications (please check)**	
						YES	**NO**
Cleaner, toilet bowl & urinal	gal	5	*2,000.00*			( )	( )
Deodorant cake, toilet	piece	120	*4,200.00*			( )	( )
Chlorine	kilo	5	*475.00*			( )	( )
Trash bag, black XXL	pieces	200	*3,600.00*			( )	( )
						( )	( )
						( )	( )
						( )	( )
						( )	( )
						( )	( )
						( )	( )
						( )	( )
						( )	( )
						( )	( )
						( )	( )
						( )	( )
						( )	( )

TOTAL AMOUNT IN WORDS : _____

Other Requirements:

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

Printed Name of authorized representative/Signature_____

Position: _____

Name of Company _____

TIN #: _____ *(Please specify if **VAT or NON-VAT**)*

Address: _____Email Address:_____

Fax No. _____. Tel No.: _____ Cellphone No._____