



**Republic of the Philippines**  
**City of Lapu-Lapu**  
**GENERAL SERVICES OFFICE**  
**Tel. No. 3405311-3412090**

**REQUEST FOR PRICE QUOTATION**

Name of Procuring Entity:	Request for Quotation (P.R. No.): 20-11-1164
Revised on: May 2004	Date : 12/2/2020
Standard Form/Title: <b>REQUEST FOR QUOTATION</b>	Office/End-User : LLC HOSPITAL
<b>COMPANY NAME:</b>	<b>ABC: 129,300.00</b>
<b>ADDRESS:</b>	
<b>TEL NO./FAX NO.:</b>	

Please quote your lowest price on the item(s) listed below, subject to the Terms and Conditions stated below and submit your quotation duly signed by your representative not later than 10:00 A.M. of December 7, 2020 in the return envelope attached herewith.

**TERMS and CONDITIONS:**

1. All entries must be typewritten or legibly written
2. Delivery period within 7C.D. upon receipt of the approved funded Purchase Order (P.O.)
3. Warranty shall be for a minimum of three (3) months for supplies & materials from dated of acceptance by the end-user.
4. Price validity shall be for a period of sixty (60) calendar days
5. PhilGEPS Registration Certificate shall be attached upon submission of the quotation
6. Bidders shall submit original brochures showing certifications of the product, if applicable

**ATTY. JAMES ALLAN SAYSON**  
 CGADH II - City Legal Office  
 BAC Chairman

Item No.	ITEMS & DESCRIPTION	QTY	UNIT	UNIT PRICE	TOTAL PRICE
1	Detergent Powder	360	Pack		
2	Bleaching Liquid	100	Gallon		
3	Chlorine	100	Pack		

**TOTAL:**

Brand and Model: \_\_\_\_\_ Warranty : \_\_\_\_\_  
 Delivery Period : \_\_\_\_\_ Price Validity: \_\_\_\_\_

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

\_\_\_\_\_  
 Printed Name / Signature Date