

REPUBLIC OF THE PHILIPPINES CITY GOVERNMENT OF DAVAO

REQUEST FOR QUOTATION

Purchase Quotation No.: PR No .:

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OTHER DESIGNATION OF THE PERSON NAMED IN		-	-	-	_

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Please quote your lowest price on the item listed below, subject to the General Conditions indicated therein and submit your quotation duly signed by your representative in sealed envelope direct to the EAC Secretariat in charge of RFQ or thru the authorized canvasser of this Department not later than _____ _ the time and date of the opening of the sealed quotation.

This office shall reserve the right to reject any or all proposals/price quotations, if there are defects therein, accepts the offer most advantageous to the government, and assumes no responsibility whatsoever to compensate or indemnify bidders for any expenses incurred in the preparation of bid.

> MICHAEL DENTON P. APORTADERA Head of Requesting Office

Sports Development Division, CMO

	J		Requesting	Office
QTY	UNIT	ARTICLE/MERCHANDISE/SPECIFICATION	UNIT PRICE	TOTAL
		NO CATEGORY		1
		Rental of venues and sports equipments of 31st		**
		Kadayawan sports festival 2016		
1	Lot	Basketball, venue, inter-colegiate tournament August		***************************************
(Package		
1 (Lot (Basketball Commercial, venue, August 11 to 14, 2	Basketball Commercial, venue, August 11 to 14, 2016		
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- All entries must be legibly written.
- Bidders must indicate only one quote per item, multiple quotations are grounds for disqualification from participating in the procurement at hand.
- Quoted prices must be inclusive of taxes and other charges of fees and shall not exceed the Approved Budget for the Contract (ABC). 3.
- Sidders must indicate SPAND/MODEL of Items offered whenever applicable.
- didders must indicate warranties, and other terms and condition when applicable.

After having carefully read and accepted your General Co	onditions. I/We au	Ote VOIL On the Item at prices noted above and
bind ourselves to deliver the above articles/merchandise within Purchase Order. Canvassed by:		rking days from the receipt of your Approved
Lonvassed by	Supplier:	Print Full Name of Establishment
Print Name/Signature	Βγ:	
		Print Name/Signature
<i>x</i>	Contact No.	