



Standard Form Number: SF-GOOD-60
Revised on: May 24, 2004

Republic of the Philippines
Province of Pampanga
CITY OF SAN FERNANDO

FOR GOODS
& SERVICES

OFFICE OF THE BIDS AND AWARDS COMMITTEE

Name of Project : **PRINTING AND DELIVERY OF EHS D FORMS**
Location of the Project : **CITY HEALTH OFFICE**

REQUEST FOR QUOTATION

Date : **MARCH 12, 2014**
Quotation No. : **SO-03-14-0708**

Company Name

Address

Please quote your lowest price on the item/s listed below and submit your quotation duly signed by your representative not later than **MARCH 20, 2014 at 10:00 A.M.** at **CGSO Building, New Public Market, City of San Fernando, Pampanga.**

Canvassed by:

Approved by:

ABIGAIL B. POLICARPIO
Administrative Aide

ENGR. MICHAEL N. QUIZON, JR.
BAC Chairman

- NOTE:
- 1 ALL ENTRIES MUST BE READABLE
 - 2 DELIVERY PERIOD WITHIN _____ CALENDAR DAYS
 - 3 WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPPLIES & MATERIALS, ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY THE PROCURING ENTITY
 - 4 PRICE VALIDITY SHALL BE FOR A PERIOD OF SIXTY (60) CALENDAR DAYS

ITEM NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL
1	10,000	pieces	Health Certificate - Non Food (Control # 76001)	P _____	P _____
2	15,000	pieces	Health Certificate - Food (Control # 180001)	_____	_____
3	5,000	pieces	Sanitay Permit	_____	_____
4	500	pieces	Pink Card	_____	_____
			vxxvxxvxxvxxvxxvxxv		
			TOTAL AMOUNT:		P _____

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

Printed Name / Signature

Tel. No. / Cellphone No.

Date