



**OFFICE OF THE BIDS AND AWARDS COMMITTEE**

Name of Project : **Supply and Delivery of Chlorine Disinfection Tablets to be used by the Task Group Quarantine and Isolation for COVID-19 response in the City of San Fernando, Pampanga**

Location of the Project : **City Health Office**

**REQUEST FOR QUOTATION**

*(FM-CSFP-CGSO-39; Revision No.02; 10/18/2019)*

Date : **October 12, 2021**

Quotation No. : **J3-21-1301**

\_\_\_\_\_  
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 **October 18, 2021 at 10:00 A.M.** at **CGSO Building, New Public Market, City of San Fernando, Pampanga.**

Canvassed by:

Approved by:

**JOAN D. GUTIERREZ**  
Administrative Aide I

**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	20	btl(s)	Chlorine Disinfection Tablet, pref. Virux Chlorine (NaDCC) Tablets 100s'  xxxxxx Nothing follows xxxxxx		
			<b>TOTAL AMOUNT</b>		<b>P</b>

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