				02-202			
Name of Procuring Entity: LGU-San Fernando Request for Quotation (P.R. No.): La - R							
Revised on:			•		_		
Stand	ard Form/Title:	REQUEST FOR QUOTATION	Date: Dec. Date: Da				
COMPANY NAME: ADDRESS: TEL NO./FAX NO.: 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 the production in the return envelope attached herewith.							
1. 2.	MPANY NAME: ADDRESS: LNO./FAX NO.: ase quote your lowest price on the item(s) listed below, subject to the Terms and Conditions stated on and submit your quotation duly signed by your representative not later than 10:00 A.M. of in the return envelope attached herewith. RMS and CONDITIONS: 1. All entries must be typewritten or legibly written 2. Delivery period within 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. PhilGEPS Registration Certificate shall be attached upon submission of the quotation 4. Bidders shall submit original brochures showing certifications of the product, if applicable TITEMS & DESCRIPTION QTY UNIT UNIT PRICE 1. Disposable Face Mask 110 Box 2. Alcohol, 70% scented 3. Hand Liquid Soap 383 Bot 4. Lysol Disinfectant spray 5. bot						
Item No.		ITEMS & DESCRIPTION	QT	UNIT			
1	Disposable Face	Mask	11	0 Box			
2	Alcohol, 70% sce	nted	2	5 Gal			
3	Hand Liquid Soar	0	38	3 Bot			
4	Lysol Disinfectan	t spray		5 bot			
Delive After	and Model: ery Period :	P	rice Validity:		you on the	- item(s) at	