

CITY GENERAL SERVICES OFFICE

REQUEST FOR QUOTATION (RFQ) No. EC2020-11-728

NP-Emergency Cases

Company Name: _____

Address: _____

Please quote your lowest price on the item/s listed below and submit your quotation together with the requirements stated hereunder to this office located at Room 442, Manila City Hall Building, Arroceros Street, Manila during office hours within **seven (7) calendar days** from receipt hereof, subject to the following terms and conditions, to wit:

1. Delivery period shall be within seven (7) calendar days upon receipt of **Purchase Order**.
2. Subject to the submission of the following documents:
 - a. DTI/SEC Certificate of Registration
 - b. Mayor's/Business Permit
 - c. PhilGEPS Registration Number
 - d. Income/Business Tax Return
 - e. Omnibus Sworn Statement

Canvassed By:

REYNALIN B. ASUNCION
Acting Supply Officer I

THELMA L. PEREZ
Officer-In-Charge

ITEM	QTY.	UNIT	ARTICLE AND DESCRIPTION	CEILING PRICE	UNIT PRICE	TOTAL PRICE
			Office: Manila Health Department Charge to: Food Supplies Expenses Supplemental Budget No. 18 ABC: Php600,000.00	PR No. OBR No.		
1.	6,000	pcs	Snacks Individually packed with sticker Bread Bottled beverage 500ml "Sustansya-rap para s bagong panganak" x-x-x-x-x-x-x-x-x-x	Php 100.00	Php _____	Php _____
				TOTAL		Php _____

Printed Name/Signature

Tel. No/Cellphone No.

Date

600,000.00

