


Republic of the Philippines  
 Department of Labor and Employment  
**OVERSEAS WORKER WELFARE ADMINISTRATION**  
 Lynjun Alegre-Sardido BESJC Bldg., Candelaria Street, Ecoland II, Davao City  
 Tel no. 227-9536 Fax no. 221-8593  
**REQUEST OF PRICE QUOTATION**

Date \_\_\_\_\_

PR No.: **24-00261**  
Date: **14-Oct-24**

Sir:

Please quote your lowest net price(s), taxes included on the item(s) hereunder listed and submit your quotation in duplicate copies and enclosed in a sealed envelope marked "Proposal for Supply and Delivery of Various Items" addressed to Overseas Workers Welfare Administration at Door 31 E-G GB Cam Bldg., Monteverde St., Davao City

  
**ANNE A. ALBAN**  
 Supply Officer

  
**GINA MAE L. QUIMORA**  
 Officer-In-Charge

Quantity	Unit	Articles	Unit Price	Total
300	sacks	7 Tonner rice, 5 kls		
		<b><u>ABC: Php 90,000.00</u></b>		
<b><u>2024 OFW FAMILY DAY - Christmas giveaways</u></b>				
<b>NOTE :</b>				
1. Please attach Philgeps Certificate and Mayor's/Business Permit.				
2. Use of non-discretion/non-discrimanatory selection criteria as tie-breaking method in case of two or more bidders determined and declared as the lowest Calculated and Responsive Bidder (LCRB) in accordance with GPPB Circular No. 06-2005.				
3. Based on the above requirement/s all price quote/submitted shall be considered final and unalterable and VAT inclusive.				
4. Proposal/Quotation submitted without signature of the Authorized signatory shall not be accepted.				
5. Bid modifications as well as bids submitted beyond the scheduled deadline shall not be considered.				
6. The OWWA reserves the right to accept or reject any bid, to annul the bidding process, and to reject at any time prior to contract award, without thereby incurring any liability to the affected bidder or bidders.				

DELIVERY : 15-30 days  
 TERMS OF PAYMENT : Government Terms  
 Price Validity: 30 - 120 Days

\_\_\_\_\_  
 (Name of Supplier)  
 \_\_\_\_\_  
 (Signature of Owner/Manager)  
 \_\_\_\_\_  
 (Print Name)  
 \_\_\_\_\_  
 (Contact Number)  
 \_\_\_\_\_  
 (Date)