



REQUEST FOR QUOTATION
PR No. RWO7-PR-25-04-091

COMPANY NAME: _____

ADDRESS: _____

To whom it may concern:

Please quote your lowest price/s (**tax included**) on the lot of item/s below, subject to the General Conditions indicated herein, stating the shortest time of delivery and submit your quotation using your company letterhead or this form duly signed by your official representative to Overseas Workers Welfare Administration, Regional Welfare Office 7 at the Lower Ground Floor, Machay Building, Gorordo Ave., Cebu City, not later than _____.


DARLENE MAE P. GILLE
Supply Officer


DINEZA Z. GELLE
BAC Chairperson

PROJECT TITLE/NAME: OWWA's 43RD ANNIVERSARY CELEBRATION - RWO 7						
ITEM NO.	SPECIFICATION	QTY	UNIT	APPROVED BUDGET FOR THE CONTRACT	UNIT COST (Vat Inclusive)	TOTAL COST (Vat inclusive)
1	Meal with Drinks	50	pax			
xxxxx Nothing Follows xxxxxx						
GENERAL CONDITIONS 1. Entries must be typewritten / if handwritten, it must be clear and legible; 2. Bidders must submit certificate of PHILGEPS Registration; 3. Bidders must submit necessary business permits (SEC, LGU, DTI, CDA, etc.); 4. Place your proposal in a sealed envelope mark as follows: Bidder's Company Name PHILGEPS Reference No. Project Title/Name PR No. 5. Item/s delivered must have warranties for unit replacements, parts, labor, or other services; 6. Quoted prices must be inclusive of taxes and shall not exceed the Approved Budget for the Contract (ABC); 7. Proposal/Quotation submitted without signature of the authorized signatory shall not be accepted; 9. Proposal/Bid modifications submitted beyond the scheduled deadline shall not be considered; 10. Use of non-discretionary/non-discriminatory 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; 11. 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: _____
TERMS OF PAYMENT : _____
PRICE VALIDITY: _____

COMPANY NAME: _____
CONTACT NO.: _____

SIGNATURE OVER PRINTED NAME OF AUTHORIZED REPRESENTATIVE

DATE