

Department of Migrant Workers OVERSEAR WORKERS WELFARE ADMINISTRATION Regional Welfare Office 7



REQUEST FOR QUOTATION

PR No. RWO7-PR-25-05-126

COMPANY NAME:						
ADDRESS:						
To whom it may con	icern:					
stating the shortest official representation	your lowest price/s (tax included) on the lot ot item/s below, s time of delivery and submit your quotation using your compar ve to Overseas Workers Welfare Administration, Regional Wel City, not later than	ny letterhead or this	form duly si	gned by your		
DARLEND MAE P. G Supply Officer	GILLE				DINEZA Z. GELI BAC (hairperso	<u>.E</u> n
PROJECT TITLE/NAM	ME: MIGRANT WORKER'S DAY 2025 CELEBRATION ON JUNE 4	, 2025				
ITEM NO.	SPECIFICATION	QТY	UNIT	APPROVED BUDGET FOR THE CONTRACT	UNIT COST (Vat Inclusive)	TOTAL COST (Vat inclusive)
1	DRINKS					
	>C2 SOLO	200	pieces			
	>500ml Bottled Water	200	pieces			
	Fund Source: Information Caravan on Membership Promotion					
	XXXXX	Nothing Follows	XXXXXX			
GENERAL CONDITIONS						
4. Place your proposal in a s Bidder's Company Ne PHILGEPS Reference Project Title/Name PR No. 5. Item/s delivered must ha 6. Quoted prices must be in 7. Proposal/Quotation subm 9. Proposal/did modification 10. Use of non-discretionary and declared as the Lowe 11. The OWWA reserves the		2005;				
	DELIVERY:					
	TERMS OF PAYMENT :					
	PRICE VALIDITY:					
	COMPANY NAME:CONTACT NO.:	_ _				
		SIGNATURE C	VER PRINTE	D NAME OF AU	JTHORIZED REPRI	ESENTATIVE
			DATE			