

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



REQUEST FOR QUOTATION

PR No. RWO7-PR-25-05-122

COMPANY NAME:						
ADDRESS:						
To whom it may cor	ncern:					
stating the shortest official representati	your lowest price/s (tax included) on the lot ot item/s below, s time of delivery and submit your quotation using your compar we to Overseas Workers Welfare Administration, Regional Wel City, not later than	ny letterhead or this	form duly s	igned by your		
DARLEND MAE P. GILLE Supply Officer					DINEZA ZOGELLE BAC (hairperson	
PROJECT TITLE/NAI	ME: MIGRANT WORKER'S DAY 2025 CELEBRATION ON JUNE 4	ı, 2025				
ITEM NO.	SPECIFICATION	QTY	UNIT	APPROVED BUDGET FOR THE CONTRACT	UNIT COST (Vat Inclusive)	TOTAL COST (Vat inclusive)
1	RENTAL:					
	Stage	1	set			
	>3 ft x 20 ft x 24 ft (H x W x L)					
	>8 Hours of Use (9:00 AM to 5:00 PM)					
			1			
	xxxxx	Nothing Follows	XXXXXX			
4. Place your proposal in a : Bidder's Company N PHILIGEPS Reference Project Title/Name PR No. 5. Item/s delivered must ha 6. Quoted prices must be in 7. Proposal/Quotation subn 9. Proposal/did modificatio 10. Use of non-discretionar and declared as the Low 11. The OWWA reserves th		2005;				
	DELIVERY:					
	TERMS OF PAYMENT :					
	PRICE VALIDITY:					
	COMPANY NAME:					
					ITHORIZE SEE	
		SIGNATURE (JVER PRINT	ED NAME OF AL	JTHORIZED REPRI	:SENTATIVE
				DATE		