



Republic of the Philippines  
Department of Migrant Workers  
**OVERSEAS WORKERS WELFARE ADMINISTRATION**  
Regional Welfare Office V



**REQUEST FOR QUOTATION**

Name of Store: \_\_\_\_\_  
Address: \_\_\_\_\_

Date & Time: JULY, 2025

Sir/Madam

Please quote your **best offer**, tax included on the items mentioned below and submit your sealed quotation/bid to OWWA RWO5 or email at [bacowwar5@gmail.com](mailto:bacowwar5@gmail.com) on or before 07/07/2025, 8am at which time and date, all submitted quotations/bids will be opened.

Bids beyond the approval budget will be automatically rejected.

Interested suppliers are required to submit their valid PhilGEPS Registration Number and Latest Mayor's / Business Permit upon submission of quotation. We reserve the right to reject any or all bids/quotations.

  
**MAYAN P. TRILLES**  
BAC Chairperson

<b>PURPOSE:</b> <i>Conduct of Model OFW Family of the Year Awards (MOFYA) - Validation and Awarding on July 18, 2025</i>				
QUANTITY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL
		<b>Meals and Venue on July 18, 2025</b>		
55	pax	<b>AM Snacks:</b> Baked Mac, Toasted Bread & Four Season		
55	pax	<b>Lunch:</b> Steamed Rice, Mushroom Soup, Grilled Pork Chop, Chopsuey & Dessert-Panna Cotta		
75	pax	<b>PM Snacks:</b> Beefy Spaghetti, Half Clubhouse Sandwich with Potato Chips, Free Flowing Coffee, Cucumber Juice		
		<b>Inclusions:</b>		
		* Free use of Venue with AC		
		* Free use of Sound System, Projector Screen and Mic		
		* Free Flowing Drinking Water & Brewed Coffee		
		* Free use of Lobby/Holding Area		
Approved Budget for the Contract: <b>73,000.00</b>			<b>TOTAL</b>	

**Note:** Payment shall be made through Land Bank of the Philippines, Legazpi branch check, within thirty (30) days after Submission of Billing and User Acceptance of the product.

**Payment Details:**

Payee Name \_\_\_\_\_

PR No: GF 2025-06-047

\_\_\_\_\_  
**MARC JAY M. BENEDITO**  
**Canvasser**

\_\_\_\_\_  
Name of Store

\_\_\_\_\_  
Signature of Manager

Contact Number \_\_\_\_\_

**Please check:**

My store issues OR: Yes \_\_\_\_\_

No \_\_\_\_\_

My store accepts government check as payment Yes \_\_\_\_\_

No \_\_\_\_\_

Taxpayer IID No (Tin) \_\_\_\_\_

Vatable \_\_\_\_\_ Non Vat \_\_\_\_\_

PhilGEPS Registered: Yes \_\_\_\_\_

No \_\_\_\_\_

PhilGEPS Registration Number: \_\_\_\_\_