



Republic of the Philippines  
Department of Migrant Workers  
**OVERSEAS WORKERS WELFARE ADMINISTRATION**  
Regional Welfare Office VI  
3F, Robinsons Place Iloilo, Corner De Leon & Quezon Sts., Iloilo City  
Telephone No. (033) 509-1075 TeleFax No. (033) 337-4484



P.R. No.: **2025-537**  
Date: **July 10, 2025**

**REQUEST FOR PRICE QUOTATION**

Sir/Madam:

Please quote your lowest net price/s, **taxes included**, on the item/s hereunder listed and submit your quotation, using your company letterhead thru fax or email and/or enclosed in a sealed envelope marked "Request for Quotation for the **LED Wall Screen Rental**" addressed to Overseas Workers Welfare Administration, 3rd Floor, Robinsons Place Iloilo, Corner De Leon and Quezon Sts., Iloilo City on or before July 21, 2025 at 10:00 a.m.

  
**REMON A. ALBEZA**  
BAC Secretariat

  
**RIZZA JOY M. MOLDES**  
BAC Chairman

DEALER'S/SUPPLIER'S OFFER					
ITEM NO.	QTY	UNIT	SPECIFICATIONS	UNIT COST	TOTAL
				Unit Price (vat inclusive)	
1	1	set	LED WALL SCREEN RENTAL		
			- 9 x 12		
			<b>Additional Documentary Requirements:</b>		
			1. Mayor's/ Business Permit		
			2. Income/ Business Tax Return		
<b>GRAND TOTAL</b>					
Amount in Words:					

DELIVERY:

TERMS OF PAYMENT

PRICE VALIDITY

\_\_\_\_\_  
(Name of Supplier)

\_\_\_\_\_  
(Signature of Owner/Manager)

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Contact Number)

\_\_\_\_\_  
(Date)