



Republic of the Philippines
SILAY CITY GOVERNMENT
 Zamora Street
 Silay City, Negros Occidental
 Telefax No: (034) 495-3746
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Project Reference No.: **SCG - 2021**

Name of Project: _____
 Location of the Project: **OFFICE OF THE CITY MAYOR**

Requested by: **MRS. RACHEL J. PABALATE**
 Executive Assistant I

Standard Form Number: SF-GOOD-59

Revised on: May 24, 2004

Standard Form Title: **Request for Quotation**

Date: _____

Quotation No.: **0188**

Page No. (s): _____

Please quote your lowest price on the item/s listed below, subject to the General Conditions on the last page, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than _____ in the return envelope attached herewith.

RAMON H. DUMANCAS
 City Budget Officer
 (BAC - Chairman)

NOTE:

- [1]. ALL ENTRIES MUST BE TYPEWRITTEN / INK.
- [2]. DELIVERY PERIOD WITHIN SEVEN (7) CALENDAR DAYS.
- [3]. WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPPLIES & MATERIALS, ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY THE PROCURING ENTITY.
- [4]. PRICE VALIDITY SHALL BE FOR A PERIOD OF _____ CALENDAR DAYS.
- [5]. G-EPS REGISTRATION CERTIFICATE / NUMBER SHALL BE ATTACHED UPON SUBMISSION OF THE QUOTATION.
- [6]. BIDDERS SHALL SUBMIT ORIGINAL BROCHURE SHOWING CERTIFICATION OF THE PRODUCT BEING OFFERED.

STOCK NO.	NAME & DESCRIPTION OF ARTICLE	UNIT	QTY.	UNIT COST	TOTAL COST
	JOB ORDER No. 0033 <i>To supply labor and materials for the production of</i> One Hundred Sixty pieces (16) Rain Protective Garments for the Barangay Health Workers (BHW's) of the City of Silay... SVP <<==== 2 0 2 1 ====>>				
				<i>Total :</i>	

Brand and Model: _____
 Delivery Period: _____
 Warranty: _____
 Period of Validity: _____

After having carefully read and accepted your General Conditions, I/We quote you on the item at prices noted above.

 Printed Name / Signature

 Telephone No. / Cellphone No.
 email address

 Date