

July 5, 2018
 APO-RFQ # 2018

REQUEST FOR QUOTATION

Name of Company :
 Address :
 TIN :
 BUSINESS PERMIT :
 PHILGEPS :

Please quote your best offer for the item/s described below, subject to the Terms and Conditions provided at the dorsal portion of this request for quotation. Submit your quotation duly signed by you or your duly representative and copies of your eligibility requirements not later than July 9, 2018.

The quotations may be submitted at the address 2/F Philippine Information Agency Bldg. Visayas Avenue, Bgy. Vasra Quezon City or thru Fax No. 2825309 (loc. 235/234) or thru email at purchasing1@apo.gov.ph

(SGD)

 Karl Paulo C. Damian
 Supply Chain Manager

After having carefully read and accept the Terms and Conditions, I/we submit our quotation for the item/s as follows:

Item Description	Contract Term	PRICE			Compliance with technical specs		*** DELIVERY DATE
		QTY	Unit	Total	YES	NO	
MICRO PERFORATING BLADE R-16-0305015		400 PCS.			<input type="checkbox"/>	<input type="checkbox"/>	

 Signature over Printed Name
 Contact Number

***Terms of payment shall be at least 30 days upon receipt of invoice
 **Delivery period shall be 15 days upon receipt of Purchase Order
 *Approved budget shall be Ps.602,000.00

*This Request for Quotation (RFQ) is electronically generated.