



January 19, 2021
 APO-RFQ-949319

REQUEST FOR QUOTATION

Name of Company :
 Address :
 Business Permit # :
 TIN :
 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 January 22, 2021.

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 purchasing@apo.gov.ph


 Ma. Merla D. Escobar
 Purchasing Manager

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

Item Description *	PRICE			Compliance with technical specs		DELIVERY DATE
	QTY	Unit	Total	YES	NO	
DISPOSABLE FACE MASK <ul style="list-style-type: none"> 3-layer mask with ear loops 	311 bxs.			[]	[]	
DISPOSABLE FACE SHIELD <ul style="list-style-type: none"> Made of acrylic, glass type, no dizzy full face shield, light weight, fog resistant, reusable, and eye glass type 	311 pcs.					
SANITIZING DISINFECTING MAT WITH TRAY <ul style="list-style-type: none"> Size: 60 x 90cm Material: scraper matting 	2 pcs.					
ANTI-SLIP COIL MATTING (drying mat)	2 yards					



Republic of the Philippines
APO PRODUCTION UNIT, INC.
2/F PIA Building, Visayas Avenue, Brgy. VASRA, Quezon City,
Metro Manila, Philippines 1128



*Prospective supplier shall submit samples of the offered items on or before submitting price quotation. The samples submitted are subject to end user's approval.

Signature over Printed Name
Contact No.

- Approved Budget shall be PhP 105,000.00 VAT Inclusive.
- Delivery period shall be 3-5 days upon receipt of Purchase Order.
- Payment shall be at least 30 calendar days upon receipt of Invoice.