



January 29, 2021
 APO-RFQ-949354

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 February 2, 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. 82825309 (loc. 235/234) or thru email at purchasing@apo.gov.ph


 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	
NYLON PLATES Size: 430 x 610mm (A21) 17in. x 24 in. Other Specification: Polyester film, Thickness: 0.70mm, Relief: 0.55mm, Hardness Shore D: 30° Relief reproduction Half tone: 150L (5-95%), Minimum Isolated Dot: 200µm, Narrowest Line: 50 µm, Typical Application: Business Forms	40 shts. or 2 bxs.			[]	[]	



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



Signature over Printed Name
Contact No.

- Approved Budget shall be PhP 84,000.00 inclusive of V.A.T.
- Delivery period shall be 3-5 calendar days upon receipt of Purchase Order.
- Payment shall be at least 30 calendar days upon receipt of Sales Invoice.