



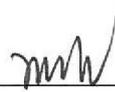
February 9, 2021
 APO-RFQ-949390

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 12, 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	
BOND PAPER • Size: 8 1/2" x 11" • 80 GSM, Substance 24 • Color: Ultra white • Size: 8 1/2" x 14" • 80 GSM, Substance 24 • Color: Ultra white	250 reams			[]	[]	
	160 reams					

Signature over Printed Name
 Contact No.

- Approved Budget shall be PhP 83,000.00 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.