October 17, 2014

APO-RFQ -2014

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 October 24, 2014.

The quotations may be submitted at the address NEDA Complex E. de los Santos Avenue, Diliman Quezon City or thru Fax No. 4335016 or thru email at purchasing@apo.gov.ph.

(SGD)

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Dominador C. Pulhin
Purchasing Officer

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

I tem Description	QTY	PRICE			Compliance with technical specs		*** DELIVERY DATE
Technical Specs	Contract Term	QTY	Unit	Total	YES	NO	
SPECIAL INKS YELLOW CYAN		100 kgs. 80 kgs.			[ ]	[ ]	

NOTE: SUPPLIER MUST SUBMIT SAMPLE FOR THE END USER'S APPROVAL

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Signature over Printed Name
Contact No.

***Delivery period should be based on the number of calendar days upon receipt of APO's Purchase Order.