

Republic of the Philippines Province of Aegros Occidental City of San Carlos

Telephone Ao. (034) 312-5205

		REF. NUMBER:	REQUEST FOR QUOTATION NUMBER: 0326		
		DATE:		March 27, 2025	
***************************************		PURCHASE REQ	UEST NO.	1-25-02-0438	
		DATED:		February 27, 2025	
		ABC:	Lot II	36,000.00	
		BAC RES. NO.	III NP-SVP/	12,000.00 0375-25	
		DATED:	111 011 2	March 27, 2025	
		CITY	ACDICIU TU	DE OFFICE	
Gentlemen:	Gentlemen: CITY AGRICULTURE OFFICE				
Please quote your lowest price on the item/s listed below, subject to the General Conditions, stating					
the shortest time of delivery and submit your quotation duly signed by your representative.					
		k	MA. BRITALD	REBADOMIA	
		DAC Co.		ADH I	
NOTE: 1	ALL ENTRIES MUST BE TYPEWRITTEN / HANDWRITTEN	BAC Sec	retanat & Pro	curement DivCMO	
2. WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPPLIES & MATERIALS,					
ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY PROCURING ENTITY					
3. PRICE VALIDITY SHALL BE FOR A PERIOD OF 120 CALENDAR DAYS					
	ALL DELIVERIES MUST BE F.O.B. SAN CARLOS CITY, NEGROS OCC		PEOLIEST EO	P OLIOTATION (PEO)	
 PLEASE SUBMIT YOUR QUOTATION 7 CALENDAR DAYS UPON RECEIPT OF REQUEST FOR QUOTATION (RFQ) EXCEPT FOR GASOLINE AND DIESEL FUEL. 					
1 1999 200 2 - 1					
NO. UNIT	ITEM & DESCRIPTION	QTY.	UNIT	TOTAL	
NO.	Lot II.		PRICE		
1 roll	Green Polynet #14, 100 meters	2			
2 roll	Sakolin, 100 meters	1			
	l of III			-	
1 shts	Lot III. Steel Matting 4 x 8	20			
1 / 5/115	X-X-X-X-X-X-X-X-X-X	20			
	Delivery Term:15 Working Days				
		1			
			_		
			_		
			_		
DUDDOO	For use in Duck and Turkey Multiplier Farm & Dispersal Pr	ogram. City Agric	culture Office	this city.	
PURPOSE For use in Duck and Turkey Multiplier Farm & Dispersal Program, City Agriculture Office, this city.					
After having carefully read and accepted your General Conditions, I/We quote you on the item/s at prices noted above.					
prioco notos above.					
		Monthly Control of the Control of th	Printed Nan	ne/Signature	
				energe en estat et en	
CANVASSED BY: Printed Name/Signature Tol No (Collabora No /E Moil Address)					
Printed Name/Signature Tel.No./Cellphone No./E-Mail Address					

Date