| Date: |  |
|-------|--|
|       |  |

## **REQUEST FOR QUOTATION**

## Gentlemen:

Please quote your lowest government price (s), stating the shortest time of delivery on the item(s) listed below and submit your quotation duly signed by your representative through email or sealed envelope directed to the Chairperson, Bids and Award Committee of this office on or before March 20, 2024.

If you do not have the exact item on request, please feel free to offer the equivalent or possible substitute.

Very Truly yours,

MECITAS D. LARGO

**BAC**, Chairperson

|   | UNIT | ARTICLES AND DESCRIPTION  | UNIT PRICE   | TOTAL |
|---|------|---|--------------|-------|
| 4 | lot  | Food and Accommodation for the Capacity Building for Recognition External         |              |       |
| 1 |      | Evaluators on April 22-26, 2024 (R9 and R10)                                      |              |       |
|   |      | Venue: CAGAYAN DE ORO CITY  |              |       |
|   |      | Guaranteed No. of Person: 80 Pax  |              |       |
|   |      | Expected: 90 pax  |              |       |
|   |      | Room Accommodation:   |              |       |
|   |      | - Triple Sharing (individual bed) w/ complete amenities                           |              |       |
|   |      | - April 22, 2024 - Check-In - 2:00PM  |              |       |
|   |      | - April 26, 2024 - Check-Out - 12:00NN  |              |       |
|   |      | Meals Requirement:  |              |       |
|   |      | April 22, 2024 - PM Snack and Buffet Dinner                                       |              |       |
|   |      | April 23-25, 2024 - Buffet Breakfast, AM Snack, Buffet Lunch, PM Snack and Buffet |              |       |
|   |      | Dinner  |              |       |
|   |      | April 26, 2024 - Buffet Breakfast and AM Snack                                    |              |       |
|   |      | Conference Room: good for 100pax  |              |       |
|   |      | - Conference Set-up (Rectangular Table)   |              |       |
|   |      | - Secretariat Table   |              |       |
|   |      | - w/ Free strong Access in WIFI   |              |       |
|   |      | - One (1) LCD with wide screen  |              |       |
|   |      | - Sound System and Extension Cord   |              |       |
|   |      | - 4 units of Wireless Microphones   |              |       |
|   |      | - With extra Extension Cord   |              |       |
|   |      | - With free flowing coffee, tea and candies                                       |              |       |
|   |      | Backdrop (min. of 6' x 8') & Welcome Streamer (min. of 3' x 4')                   |              |       |
|   |      | - (2) White/Black Board w/ whiteboard pen and eraser                              |              |       |
|   |      |   |              |       |
|   |      | Other Requirements to be submitted:   |              |       |
|   |      | Philgeps Registration Number  |              |       |
|   |      | Mayor's Permit  |              |       |
|   |      | Income/Business Tax Return  |              |       |
|   |      | Omnibus Sworn Statement   |              |       |
|   |      | Annex A Technical Specifications  Conditions:                                     | <del> </del> |       |
|   |      | Terms of Payment: Send Bill   |              |       |
|   |      | Quotation - inclusive of VAT  | 1            |       |
|   |      | For any queries, you may Contact Nos. 8571-6833/8571-4615                         | 1            |       |
|   |      | Email Add: bac@eccdcouncil.gov.ph/cora@eccdcouncil.gov.ph/sam@eccdcouncil.gov     | / ph         |       |

After having carefully read and accept your requirements, I/we quote you on the above items and bind ourselves to deliver the above articles and description within the specified dates. The quotations are good up to 60 calendar days.

| SUPPLIER           |  |  |  |
|--------------------|--|--|--|
| Signature          |  |  |  |
| Name & Designation |  |  |  |
| Company Name       |  |  |  |
| Address            |  |  |  |
|                    |  |  |  |
| Telephone Nos.     |  |  |  |
| CP No.             |  |  |  |