EARLY CHILDHOOD CARE AND DEVELOPMENT COUNCIL 4th Floor, Belvedere Tower, No. 15, San Miguel Avenue, Ortigas Center, Pasig City

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 May 13, 2025.

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

Very Truly yours,

NECITAS D. LARGO

BAC Chairperson

UNIT	Description	Unit Price	Total
1 lot	Accommodation for the ECCD Council Participants for the 2025		
	ARNEC Conference on June 30 to July 4, 2025		
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	Expected Participants: 25 pax		
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	- July 4, 2023 Check Out 12.00MM		
	Other Pequirements to be submitted:		
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		Accommodation for the ECCD Council Participants for the 2025 ARNEC Conference on June 30 to July 4, 2025 Expected Participants: 25 pax Room Requirements: - Twin Sharing individual bed w/ complete amenities - with Breakfast - June 30, 2025 - Check-In - 2:00PM - July 4, 2025 - Check-Out - 12:00NN - July 4, 2025 - Check-Out - 12:00NN - Dily 4, 2025 - Check-Out - 12:	Accommodation for the ECCD Council Participants for the 2025 ARNEC Conference on June 30 to July 4, 2025 Expected Participants: 25 pax Room Requirements: - Twin Sharing individual bed w/ complete amenities - with Breakfast - June 30, 2025 - Check-In - 2:00PM - July 4, 2025 - Check-Out - 12:00NN Other Requirements to be submitted: Philgeps Registration Number Mayor's Permit Business/Income Tax Return BIR Registration Certificate Notarized Omnibus Sworn Statement Conditions: Terms of Payment: Send Bill Quotation - inclusive of VAT

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		
Office/Company Name		
Address		
Telephone/CP. Nos.		