

Standard Form Number: SF-GOOD-60

Revised on: May 24, 2004

Standard Form Title: Request for Quotation

Date: December 15, 2021

Quotation No. 20211220

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Address

Please quote your lowest price on the item/s listed below, subject to the General Conditions written below, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than \_\_\_\_\_ in the return envelope attached herewith.



**GENEROSO N. MAZO**

Chairman, Bids & Awards Committee

**General Conditions of the Contract:**

1. ALL ENTRIES MUST BE TYPEWRITTEN
2. DELIVERY PERIOD WITHIN *TWO (2)* CALENDAR DAYS.
3. WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPPLIES & MATERIALS, ONE (1) YEAR  
FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY LEYTE NORMAL UNIVERSITY
4. PRICE VALIDITY SHALL BE FOR A PERIOD OF THIRTY (30) CALENDAR DAYS
5. G-EPS REGISTRATION CERTIFICATE SHALL BE ATTACHED UPON SUBMISSION OF THE QUOTATION
6. BIDDERS SHALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATIONS OF THE PRODUCT BEING OFFERED
7. This project is 1 lot.

ITEM NO.	ITEM & DESCRIPTION	QTY	ABC	QUOTATION
	Food (AM Snacks, Lunch & PM Snacks)			
	Day 1			
1	AM Snacks	460	46,000.00	
2	Lunch	460	207,000.00	
3	PM Snacks	460	46,000.00	
	Day 2			
4	AM Snacks	460	46,000.00	
5	Lunch	460	207,000.00	
6	PM Snacks	460	46,000.00	
	<b>TOTAL</b>		<b>598,000.00</b>	

Delivery Period \_\_\_\_\_

Warranty \_\_\_\_\_

Price Validity \_\_\_\_\_

After having carefully read and accepted your General conditions, I/we quote on the item/s at price noted above

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Tel. No./ Cellphone No.

\_\_\_\_\_  
Printed Name/Signature

\_\_\_\_\_  
Date