Request for Quotation

To: Tel. No.: Fax No.				tion #:	November 3, 2020 PS-020-11-098		
Attention:		_					
Sir/Madam: Please qu your represe	•	listed below, stating the shortest time	of deli	RO	submit this from the submit this from the submit this from the submit this from the submit the submit this from the submit this from the submit this from the submit this from the submit t	ENAL	
To be filled	out by Supplier:						
ITEM NO:	ITEM & DE	ESCRIPTION	QTY	UNIT	UNIT	TOTAL PRICE	
	Procurement of:						
	Face Mask disposable, 50pcs per box			box			
	Liquid Handsoap 500ml, scented		1000	pieces			
	Alcohol (70% solution)(Isopropyl) 1000ml or 1L		300	bottles			
	Hand Sanitizer (with pump) 1000ml or 1L		100	bottles			
	Aerosol (Disinfectant Spray) 19oz		100	bottles			
	Disinfectant Solution 1 Gallon		400	gallons			
		at-Included)					
Delivery Per Warranty: Price Validity		- - -					
			SIGNATURE OF AUTHORIZED				
2. Bidders m a. [] Mayor's b. [] PhilGEl c. [] Income d. [] Omnibu	s / Business Permit; PS Registration Number: / Business Tax Return (for Small Value us Sworn Statement for Small Value	entary legal requirements upon sendin Membership: [] Platinum [] F	Red se Orde	led out o		IIVE	
Sir, I hereby certify under oath that I have personally conducted this canvass, which the price/s quoted are true and correct, and the signature of representative of the company submitting the quotation is genuine. ISRAEL DALLUAY / RUEL BERMUDEZ SIGNATURE OF CANVASSER							
For more info	ormation, you may contact us:						

Telephone: (02) 8836-3314, (02) 8988-1674 Loc 777

Telefax: (02) 8813-1174 *Please send your quotation to:*

rbermudez.osg@gmail.com/icdalluay@osg.gov.ph/mvcastillo@osg.gov.ph/02.choinks.72@gmail.com/icdalluay@osg.gov.ph/mvcastillo@osg.gov.ph/02.choinks.72@gmail.com/icdalluay@osg.gov.ph/mvcastillo@osg.gov.ph/02.choinks.72@gmail.com/icdalluay@osg.gov.ph/mvcastillo@osg.gov.ph/02.choinks.72@gmail.com/icdalluay@osg.gov.ph/mvcastillo@osg.gov.ph/02.choinks.72@gmail.com/icdalluay@osg.gov.ph/osg