



Professional Regulation Commission

REQUEST FOR QUOTATION

RFQ #: 2020-027

Date: November 9, 2020

SIR / MADAM:

May we invite your company to quote for the lowest price/s, VAT included, on the items/s listed and described hereunder.

Please submit your QUOTATION to the Bids and Awards Committee (BAC), through BAC Secretary Ms. Karen M. Magsalin, through Facsimile No. (02) 310-0037, which shall be stamped thereon the date and time received and shall place the same in the "Bids Box".

The quotation must be received by the BAC Secretariat not later than three (3) days from receipt hereof and not beyond 3:00 o'clock in the afternoon of the last day to submit the quoted price. All bids which are higher than the ABC shall be automatically disqualified.

The BAC reserves the rights to reject any and all bid/s submitted which is/are not in accordance with the specification and those submitted after the deadline. Provided, the supplier shall reimburse PRC in case of over pricing.

Very truly yours,

Served by:

ARISTOGERSON T. GESMUNDO
Chairman, Bids & Awards Committee

Canvasser

Date:

Quantity	Unit	Item (with specification)	Unit Cost
7,562	piece	Corrugated Box – 1 Lot 347 x 220 x 540 mm, 175 lbs., plain Delivery Term: (Approved Purchase Order) <ul style="list-style-type: none">• 1st delivery: 2,500 pcs - 20 calendar days upon receipt of approved PO• 2nd delivery: 2,500 pcs - 20 calendar days upon receipt of Notice to Deliver• 3rd delivery: 2,562 pcs - 20 calendar days upon receipt of Notice to Deliver	Php40.00
2,501	roll	Super Adhesive Sealing Tape – 1 Lot For Confidential Packing Use with Black Print: "PROFESSIONAL REGULATION COMMISSION DO NOT ACCEPT IF SEAL IS BROKEN" Delivery Term: (Approved Purchase Order) <ul style="list-style-type: none">• 1st delivery: 1,501 rolls - 20 calendar days upon receipt of approved sample• 2nd delivery: 1,000 rolls - 20 calendar days upon receipt of Notice to Deliver NOTE: MODE OF PAYMENT: BANK TO BANK (OTHER THAN LANDBANK ACCOUNT, BANK CHARGES SHALL BE PAID BY THE SUPPLIER) VAT INCLUSIVE	41.00

Received by:

(Name & Signature of Proprietor/ Authorized Representative)

Telephone/ Fax no. _____

IMPORTANT:

PLEASE FILL UP ALL REQUIRED DATA AND SUBMIT A PHOTOCOPY OF YOUR VALID BUSINESS PERMIT AND PROOF OF PHILGEPS REGISTRATION.

P. PAREDES ST. CORNER N. REYES ST. SAMPALOC, MANILA, TELEFAX. NO. 5310-2013

By: ASantos

11/11/2020
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