

PHILIPPINE SCIENCE HIGH SCHOOL SYSTEM

REQUEST FOR QUOTATION FORM & NOTICE
(GOODS)

Office/ Campus: PHILIPPINE SCIENCE HIGH SCHOOL CALABARZON REGION CAMPUS
Address/ Contact Details: Barangay Sampaga West, Batangas City

2022-11-193
November 29, 2022

SIR/MADAM

Quotation No.:
Date :

May we request for quotation on materials enumerated hereunder. If you are interested and in a position to furnish the same, we shall be glad to have your best prices.

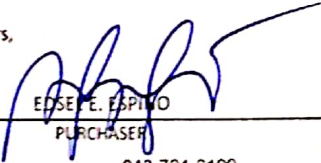
Delivery within _____ calendar days upon receipt of approved Purchase Order (PO).

In case of failure to make the full delivery/completion within the time specified as offered/required, the Supplier/ Contractor shall be liable for liquidated damages/penalty of one-tenth (1/10) of one percent (1%) of the Contract Price per calendar day of delay minus the value of the delivered/completed portion(s) of the approved P.O./Contract.

Item #	QTY	UNIT	ITEM/DESCRIPTION	UNIT COST	TOTAL COST
			PRICES MUST BE Tax (VAT) INCLUSIVE SUPPLY & DELIVERY		
1	30	SET	MEALS FOR THE PSHS-CALABARZONRC COVID-19 VACCINATION DRIVE		
			AM SNACKS (SANDWICH AND DRINKS)		
			-LUNCH (RICE, 1 SERVING OF VEGETABLES, 1 MAIN COURSE, DESSERT & DRINKS)		
			-PM SNACK (NOODLES AND DRINKS)		
			-FOR THE DRINKS, PREFERABLY, FRUIT JUICE OR CARBONATED DRINKS, AT LEAST 350 ML, BOTTLED OR CANNED.		
			-DELIVERY FEE INCLUDED		

Delivery Term : DECEMBER 2, 2022
 Delivery Time : _____
 Payment Term : WITHIN 30-45 CALENDAR DAYS AFTER THE COMPLETE DELIVERY OF ITEMS

Very truly yours,


 EDSEL E. ESPINO
 PURCHASER

Authorized Company Representative : _____

PRICES IN THE ABOVE OFFER ARE
 CERTIFIED TRUE AND CORRECT:

Telephone: 043-724-6199

(Signature Over Printed Name)

IMPORTANT

1. Prices must be typewritten in ink clearly.
2. If offering a substitute/equivalent, specify the brand and make.

Company Name : _____
 Address : _____
 Telephone nos. : _____
 T.I.N. : _____