

## Republic of the Philippines DEPARTMENT OF PUBLIC WORKS AND HIGWAYS MINDORO ORIENTAL DISTRICT ENGINEERING OFFICE Masipit, Calapan City, Oriental Mindoro, MIMAROPA REGION (IV-B)

Name of P	Procuring Entity	Request for Q	uotation (P.R	. No.) : <b>2024-</b>	09-375	
Revised or	n:		Date	: Septer	nber 16, 2024	
Standard F	Form/Title	REQUEST FOR QUOTATION	Office/End	I-User :		
cc	OMPANY NAME	:				
	ADDRESS	:				34
TEI	L. NO./FAX No.	:		TIN	:	
TERMS (1. All enter Cooks)  1. All enter Cooks (P.O). All be 3. Warrand date of a 4. Price of 5. G-EPS submissions for The all process of incuring 8. Bidden	and CONDITI tries must be to the period within dministrative primposed for no traceptance by the validity shall be to the period by the period	ypewritten or legibly written. in 30 c.d upon receipt of the approved funded Purchase ( enalties pursuant to Sec. 69 of the Revised IRR-RA 91) en-delivery without valid reason. In a mininum of three (3) months for supplies & materials the end-user. In a period of sixty (60) calendar days. Certificate, Mayor's Permit, DTI/SEC shall be attached up	20,2024 in Il Mindoro.  Order 84  from	the return en	BIEN M. MAHIA stant District Engineer BAC-Chairperson)	nerewith, to the
Item No.		ITEMS & DESCRIPTION	QTY.	UNIT	UNIT PRICE	TOTAL PRICE
I	Food (Mea	ls/Snacks)	56	pax		-
			-	-		
II	Training K	its/Supplies	43	рс		
III	Accommod	lations	50	pax		
3200-0011			1 30	Pux		
IV	Venue		3	days		
			-			-
V	Van Renta		3	unit		-
	Vall Itelieu		- 3	unic		
VI	Contingen	cies	ls	ls		
20	Supplier must que	Contract/P.O. under this RFQ will be on a lump-sum basis, hence, ote for all of the items. Any erasure, correction or alteration made by by of the items shall render the bid non-complying, hence, a ground for		=		
Brand and	d Model :	Warranty	:	· V		
Delivery I	Period :	Price Validity	:			
After	having careful	ly read and accepted your General Conditions, I / We q rranty and Price Validity are left blank, it means that I c	uote you or oncur with	the item(s) a the Terms and	at prices note abo Conditions specif	- ve. If the space ied by DPWH.
	Tel. No.	Telefax:		Drin	ted Name / Signati	ro / Dato

Tel. No. / Cellphone No. / E-mail Address