

Republic of the Philippines

OFFICE OF THE PRESIDENT

NATIONAL COMMISSION ON MUSLIM FILIPINOS

REQUEST FOR QUOTATION

Authority: Sec. 53.9 (Small Value Procurement)
End-User: Human Resource Development Division

RFQ No. 2017-064 Date: November 9, 2017

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Please quote your lowest price on the item/s listed below, subject to the following General conditions, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than November 14, 2017 (12:00 noon) by e-mail at ncmf.bac2016@qmail.com, fax at (02) 952-4875, or personal delivery.

LAMAN M. PIANG, CESO IV
BAC Chairman

Terms and Conditions:

- 1. Only suppliers registered at the PhilGEPS shall be allowed to submit the quotation.
- 2. All entries must be typewritten/printed eligibly and without alterations. If there is any same shall be initialed by authorized personnel. Failure to use this form will result to disqualification of your bid.
- 3. Delivery period within 3 days from receipt of the P.O.
- 4. Late submission of quotation shall not be accepted.
- 5. Price validity shall be for a period of thirty (30) calendar days.
- 6. The Lowest Bidder shall be informed immediately and shall be asked to submit additional requirements within three (3) days or less after the TWG evaluation.
- 7. Award of contract shall be made to lowest quotation, and complies with the specifications and other terms and conditions stated in the RFQ.
- 8. The NCMF reserves the right to reject any or all bid proposals, or declares the bidding a failure, or not to award the contract, and makes no assurance that a contract shall be entered into as a result of this invitation.
- 9. Terms of payment shall be made through check payable to the supplier.
- 10. All quotations should be inclusive of VAT.

TECHNICAL SPECIFICATIONS	REMARKS	
Title of Seminar/Training: NCMF-HRDD Training Workshop for NCMF HR PRACTITIONERS.	4DG: D2 000 00	
1. PRINTING OF TAPAULIN (8 X 6) 2PCS	ABC: P2,000.00	

After having care	efully re	ead and accepted your General Conditions. I/We quote you on the item	n at prices noted above
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		Company Name/Signature over Printed Name of Authorized Representatives	5
		Telephone/Cell No./E-mail address	
		Date:	