



Republic of the Philippines
OFFICE OF THE PRESIDENT
NATIONAL COMMISSION ON MUSLIM FILIPINOS

BIDS AND AWARDS COMMITTEE

REQUEST FOR QUOTATION

Title of the Project: HAJJ OPERATION 2018 (EDP)		
RFQ No. 2018-037	Date: March 23, 2018	MOP: NP-Shopping Sec 52.1.(b)
Delivery Area: NCMF - QC	Deadline: March 28, 2018 ABC : P24,000.00	End-user: BPE- EDP

Sir/Madam:

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 the deadline by e-mail (ncmf.bac2016@gmail.com), fax (02-952-4875), or personal delivery.


ARAMAN S. BELLEG
Director and BAC Chairman

Terms and Conditions:

1. Suppliers are required to submit their PhilGEPS Platinum Registration (2-3 pages). PhilGEPS Red Members must also submit copy of their Mayor's/Business Permit and Tax Registration.
2. All entries must be typewritten/printed legibly 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 FIVE (5) days from receipt of the P.O/Contract.
4. Late submission of quotation shall not be accepted.
5. Price validity shall be for a period of thirty (30) calendar days.
6. Award of contract shall be made to lowest quotation, and complies with the specifications and other terms and conditions stated in the RFQ.
7. 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.
8. Terms of payment shall be made through check payable to the supplier.
9. All quotations should be **inclusive** of VAT.

Item No.	ITEM & DESCRIPTION	UNIT	QTY	Budget Allocation	Price Quotation
1	HOLOGRAM STICKER (FOR ID SECURITY 12 MM x 12MM)	Pcs	6000	P24,000.00	

After having carefully read and accepted your General Conditions. I/We quote you on the item at prices noted above.

Company Name/Signature over Printed Name of

Authorized Representative

Telephone/Cell Bo./e-mail address

Date: