



Republic of the Philippines

OFFICE OF THE PRESIDENT

NATIONAL COMMISSION ON MUSLIM FILIPINOS

BIDS AND AWARDS COMMITTEE

Request for Quotation

PROCUREMENT:	<i>Risograph Printing of Medical form to be used in Hajj 2018 Operation in Kingdom of Saudi Arabia</i>	
RFQ No. 2018-071	Date: July 10, 2018	Mode of Procurement: NP-SVP
Location: Metro Manila	Deadline: July 13, 2018	End-User: NCMF- BPE

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 email (ncmf.bac2016@gmail.com), fax (02-9524875), or personal delivery.


DIMAPUNO A. DATU-RAMOS, JR.
BAC Chairman/BER Director IV

Terms and Conditions:

- 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.
- All entries must be typewritten/printed eligibly and without alterations. If there is any alteration same shall be initialed by authorized personnel. Failure to use this form will result to disqualification of your bid.
- Delivery period within FIVE (5) days from receipt of the Purchase Order/Contract.
- Late submission of quotation shall not be accepted.
- Price validity shall be for a period of thirty (30) calendar days.
- Award of Contract shall be made to lowest quotation, and complies with the specifications and other terms and conditions stated in the RFQ.
- 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.
- The terms of payment shall be made through check payable to the supplier.
- All quotations shall be inclusive of VAT.

	SPECIFICATIONS	QUOTATION
1.	RFQ FOR: <i>Risograph printing of Medical Form for Hajj 2018</i>	
2.	APPROVED BUDGET FOR THE CONTRACT: <i>P4,000.00</i>	
3.	Quantity: <i>10 reams</i> Size: <i>as per sample</i>	

After having carefully read and accepted the General Condition herewith, I/We quote on the item at prices noted above.

Company Name and PhilGEPS No.

Signature over Printed Name of the Authorized Representative

Telephone/Cellphone No./Email address

Date Accomplished