

REQUEST FOR QUOTATION

The Public Attorney's Office will undertake a procurement transaction for the procurement of **TWO (2) SWIVEL CHAIRS and ONE (1) CLERICAL TABLE** through Shopping under Section 52.1(b) of the revised Implementing Rules and regulations (IRR) of Republic Act No. (RA) 9184, for the use of the PAO – Dapa District Office. The approved budget for the contract (ABC) is **SEVEN THOUSAND ONE HUNDRED PESOS (Php7,100.00)** inclusive of government taxes and charges.

The Office hereby invites all interested suppliers or distributors to quote their lowest price on the item listed on the Price Quotation Form (Annex "A") subject to the General Conditions stated herein. Please submit your quotation duly signed by you or your authorized representative **not later than September 12, 2023** to the address below:

PUBLIC ATTORNEY'S OFFICE CARAGA REGIONAL OFFICE

2nd Floor, CTP Building Brgy. Libertad, Butuan City

For further inquiries, please look for:

ATTY. ANDREW S. JALAD

Public Attorney III Public Attorney's Office, Butuan City (085) 3050-553

General Conditions:

- 1. ALL ENTRIES MUST BE SIGNED BY THE BIDDER OR AUTHORIZED REPRESENTATIVE;
- 2. DELIVERY LOCATION: PUBLIC ATTORNEY'S OFFICE, DAPA DISTRICT OFFICE, BRGY. 6, DAPA, SURIGAO DEL NORTE;
- 3. DELIVERY PERIOD: 7 CALENDAR DAYS UPON RECEIPT
- 4. PRICE VALIDITY SHALL BE FOR A PERIOD OF THIRTY (30) CALENDAR DAYS;

PRICE QUOTATION FORM

Date: _____

Regional Office Public Attorney's Office 2nd Floor, CTP Building Brgy. Libertad, Butuan City

Sir/Ma'am:

After having carefully read and accepted the terms and conditions on the Request for Quotation, hereunder is our quotation for the item as follows:

Item No.	Description	Quantity	ABC Total Price	Unit Price	Total Price
1	SWIVEL CHAIR	2 units	3,600.00		
2	CLERICAL TABLE	1 unit	3,500.00		
	TOTAL		7,100.00		

(Total amount in Words)

The above quoted prices are inclusive of all cost and applicable taxes.

Delivery Period	
Warranty	
Price Validity	

Very truly yours,

Name and Signature of Authorized Representative

Name of Company

Company Address

Contact Number/s

Email Address