



Republic of the Philippines
(PUBLIC ATTORNEY'S OFFICE)
TAGUDIN, ILOCOS SUR DISTRICT OFFICE
Justice Hall
Tagudin, Ilocos Sur
Email Address: *paotagudin@yahoo.com*
Tel. No. (077) 644-0426



REQUEST FOR QUOTATION

The Public Attorney's Office will undertake a procurement transaction for the purchase of **one (1) piece Continuous Ink Printer** through Small Value Procurement (SVP) under the Revised Implementing Rules and Regulations (IRR) of Republic Act No. (RA) 9184, for the use of the **PAO-Tagudin, Ilocos Sur District Office**. The Approved Budget for the Contract (ABC) is **SEVENTEEN THOUSAND PESOS (Php17,000.00)** inclusive of government taxes and charges.

The Office hereby invites all interested suppliers or distributors to quote their lowest price on the items 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 **October 27, 2023** to the address below:

PUBLIC ATTORNEY'S OFFICE
Tagudin, Ilocos Sur District Office
Tagudin, Ilocos Sur
Email Add: *paotagudin@yahoo.com*
Tel. No. (077) 644-0426

For further inquiries, please look for:

MR. EARL JOSHUA M. SANCHEZ
PUBLIC ATTORNEY'S OFFICE
Tagudin, Ilocos Sur
Contact No. 0927-821-0650

General Conditions:

1. ALL ENTRIES MUST BE SIGNED BY THE BIDDER OR AUTHORIZED REPRESENTATIVE;
2. DELIVERY LOCATION: PUBLIC ATTORNEY'S OFFICE, TAGUDIN, ILOCOS SUR
3. DELIVERY PERIOD: 15 CALENDAR DAYS UPON RECEIPT OF P.O.
4. PRICE VALIDITY SHALL BE FOR A PERIOD OF THIRTY (30) CALENDAR DAYS;

PRICE QUOTATION FORM

Date: _____

PUBLIC ATTORNEY'S OFFICE
Tagudin, Ilocos Sur

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	Continuous Ink Printer	1	17,000.00	17,000.00	
TOTAL			17,000.00		

(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