



PAMANTASAN NG LUNGSOD NG MAYNILA

(University of the City of Manila)

Intramuros, Manila

REQUEST FOR PRICE QUOTATION

Date: _____

RFQ No.: _____

Company Name: _____

Address: _____

TIN: _____

Business Permit No.: _____

PhilGEPS Cert. No.: _____

Please quote your best offer for the item/s described below, subject to the Terms and Conditions provided at the back portion of this request for quotation. Submit your quotation duly signed by you or your duly authorized representative not later than _____.

Open quotations may be submitted, manually or through facsimile or email at the address and contact number indicated below.


Atty. PRINCESS CARÉSSA V. PEREZ

Acting Chief, Procurement Office

After having carefully read and accepted the Terms and Conditions, I/We submit our quotation/s for the item/s as follows:

Item Description	Qty.	Unit of Issue	Approved Budget for the Contract (ABC)	OFFER				
				Price (Inclusive of Tax)		Compliance with Technical Specifications (please check)		Remarks
				Unit Price	Total Price	Yes	No	
Purchase of Covid-19 Supplies								
PPE Suit, large size	32	pc.	24,000.00					
Face Mask (KN95), 10pcs./box	200	box	11,000.00					
Nitrile Gloves, (unsterile), disposable, 100 pcs./box	100	box	70,000.00					
Garbage Bag, 9" x 9"	10000	pc.	50,000.00					
Garbage Bag, large size, green color	5000	pc.	30,000.00					
Thermo Scan	12	pc.	32,400.00					
Alcohol, isopropyl, 70% (1 gal.)	200	gal.	120,000.00					
Detergent Soap	200	kg.	10,000.00					
Bleach, liquid	200	gal.	36,000.00					
Nano Fogging Spray Gun (heavy duty) (portable) Voltage: 110/220V, 50/60Hz Power: at least 1200W Bottle volume: at least 280ml. Spray ability: at least 22ml./min. Power cord length: at least 2.5 meters	12	unit	48,000.00					
Shoe Cover, disposable	100	pair	900.00					
Total			432,300.00					

Gen. Luna cor. MurallaSts., Intramuros, Manila

Telefax No. (02)528-4592, Email add: procurement@plm.edu.ph

Note: Delivery period of 15 calendar days upon receipt of Purchase Order								
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PR 10-11-03 GSO

This is to certify that I personally conducted the canvass and that the data herein are true and correct.

Payment Terms: _____

Delivery Period: _____

(Signature over Printed Name)

Tel. No.: _____

Mobile No.: _____

E-Mail: _____



NOLI C. DISCAYA, JR.
Canvasser

Mobile No.: 0925-7305799

Email Add.: ncdiscaya@plm.edu.ph