

Republic of the Philippines
 Department of Education
 Region VII, Central Visayas
DIVISION OF LAPU-LAPU CITY
 B.M. Dimataga St., Poblacion, Lapu-Lapu City
 Telefax No. (032) 340-7887

Project Reference Number: 2017-Alt-009
 Name of Project: K to 12 Training
 Location of Project: _____

Date: _____
 Quotation Number: _____

Standard Form Number: **SF-GOOD-60**
 Revised on: May 24, 2004
 Standard Form Title: **Request for Quotations**

Please quote your lowest price on the item/s listed below, subject to the General Conditions on the last page stating the shortest time delivery and submit your quotation duly signed your representative not later than **April 10, 2017** in the return envelope attached herewith.

- Note:
1. All entries must be typewritten.
 2. Delivery period within _____ calendar days
 3. Warranty shall be for a period of six(6) months for supplies and materials, one(1) year for equipment, from date of acceptance by the procuring entity.
 4. Price validity shall be for a period of _____ calendar days.
 5. Philgeps registration certificate shall be attached upon submission of the quotation.
 6. Bidders shall submit original brochures showing certifications of the product being offered.

ISABEL B. BUNSATO
 Procurement Officer

Item No.	ITEM AND DESCRIPTION	UNIT	QTY	Unit Price
1	Provision of the following for K to 12 training on May 7-13, 2017:			
	A. Four (5) Function Rooms for 60-65 pax per room (for 6 days)			
	B. One (1) Function Room for Plenary for 316 pax - (for One day only)			
	C. Night Room Accomodation for 316 pax for 6 days - (Double-Quad Sharing)			
	D. Six (6) Breakfast (from Day 2 to Day 7)			
	E. Seven (7) Lunch (from Day 1 to Day 7)			
	F. Six (6) Dinner (from Day 1 to Day 6)			
	G. Thirteen (13) Snacks			
	Note: Function Rooms shall be provided with free-flowing coffee, projectors, audio-visual facility and Internet Connection			
	Please provide us the following:			
	A. Meal and Snacks menu for the duration of the Training			
	B. Rate for Live-in participants = _____ per day			
	C. Rate for Live-out participants = _____ per day			

Brand and Model : _____
 Delivery Period : _____
 Warranty : _____
 Price Validity : _____

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

Printed Name over Signature: _____
 Tel. No./Cellphone No./E-mail: _____
 Date: _____