



# Professional Regulation Commission

## REQUEST FOR QUOTATION

RFQ #: 2021-002

Date: May 19, 2021

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\_\_\_\_\_  
\_\_\_\_\_

SIR / MADAM:

May we invite your company to quote for the lowest price/s, VAT included, on the items/s listed and described hereunder.

Please submit your QUOTATION to the Bids and Awards Committee (BAC), through BAC Secretary Ms. Karen M. Magsalin, through Facsimile No. (02) 5310-0037, which shall be stamped thereon the date and time received and shall place the same in the "Bids Box".

The quotation must be received by the BAC Secretariat not later than three (3) days from receipt hereof and not beyond 3:00 o'clock in the afternoon of the last day to submit the quoted price. All bids which are higher than the ABC shall be automatically disqualified.

The BAC reserves the rights to reject any and all bid/s submitted which is/are not in accordance with the specification and those submitted after the deadline. Provided, the supplier shall reimburse PRC in case of over pricing.

Very truly yours,

  
**ARISTOGERSON T. GERSMUNDO**  
Chairman, Bids & Awards Committee

Served by:

\_\_\_\_\_  
Canvasser

Date: \_\_\_\_\_

Quantity	Unit	Item (with specification)	Unit Cost
2,325	piece	KN95 Face Mask	Php65.00
55	bottle	Alcohol, Isopropyl 68%-72%, 500ml (-5ml)	105.00
18	gallon	Alcohol, Isopropyl 68%-72%, scented 3.785 liters	533.00
1,261	bottle	Alcohol, Ethyl 68%-72%, scented 500ml (-5ml)	99.00
108	pack	Tissue, Interfolded Paper Towel	50.00
518	piece	Face Shield, direct protection	10.00
559	piece	Nitrile Gloves	9.00
17	bottle	Hand Soap, liquid 500ml	205.00
***nothing follows***			
<i>delivery period: within 15 calendar days from receipt of purchase order &amp;</i>			
<b>NOTE: MODE OF PAYMENT: BANK TO BANK (OTHER THAN LANDBANK ACCOUNT, BANK CHARGES SHALL BE PAID BY THE SUPPLIER.)</b>			
<b>VAT INCLUSIVE</b>			

Received by:

\_\_\_\_\_  
(Name & Signature of Proprietor/ Authorized Representative)

Telephone/ Fax no. \_\_\_\_\_

IMPORTANT:

PLEASE FILL UP ALL REQUIRED DATA AND SUBMIT A PHOTOCOPY OF YOUR VALID BUSINESS PERMIT AND PROOF OF PHILGEPS REGISTRATION.

P. PAREDES ST. CORNER N. REYES ST. SAMPALOC, MANILA, TELEFAX. NO. 5310-2013 / 5310-0037

By:  ASantos ✓

*AS Santos*  
*11:49*