Republic of the Philippines
Province of Pampanga
Municipality of Lubao

# REQUEST FOR QUOTATION

Date: _____

_____

_____

*Gentlemen:*

*Please quote your lowest net price, taxes includeds, on each of the following articles.*

| ITEM | UNIT | QTY. | COMMODITY & DESCRIPTION | UNIT PRICE | AMOUNT |
|---|---|---|---|---|---|
| 1 | PACKAGE | 100 | TREATMENT PACKAGE | | |
| | | | ACID CONCENTRATE | | |
| | | | BICARBONATE POWDER | | |
| | | | BLOODLINES | | |
| | | | FISTULA NEEDLE | | |
| | | | HEPARIN SODIUM 1000IU | | |
| | | | FISTUKA KIT | | |
| | | | PLAIN NSS 1 LITER | | |
| | | | NIPRO ELISIO 190HR | | |
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| | | | TOTAL | | |

The prices quoted herein be delivered to the office of the Municipal Mayor, Lubao, Pampanga _____days after serving the award

Very truly yours,

**RUSSELITO B. JIMENEZ**
*Canvasser*

To the Municipal Mayor
Lubao, Pampanga

Our quotation is indicated opposite each articles indicated above

_____
Signature of Dealer

_____
Printed Name