Republic of the Philippines
Province of Pampanga
Municipality of Lubao

# REQUEST FOR QUOTATION

Date: _____
RFQ No: _____

_____
_____

*Gentlemen:*

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

| ITEM | UNIT | QTY. | COMMODITY & DESCRIPTION | UNIT PRICE | AMOUNT |
|---|---|---|---|---|---|
| | | | DOXYCYCLINE 100mg | | |
| | | | KETOCONAZOLE 10g | | |
| | | | | | |
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