Republic of the Philippines
Province of Pampanga
Municipality of Lubao

QUOTATION PRICE

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	BOX	20	ROSUVASTATIN 10 MG		
2	BOX	20	PARACETAMOL 500 MG		
3	BOT	50	PARACETAMOL 250MG / 5 ML		
4	BOX	10	AZITHROMYCIN 500MG 3'S		
5	BOX	10	CEFUROXIME 500MG		
6	BOX	10	LEVOFLOXACIN 500MG		
7	BOX	10	CLOPIDOGREL 75 MG		
8	BOX	10	CO- AMOXICLAV 625MG		
9	BOX	10	VIT. B COMPLEX		
			TOTAL		

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

Very truly yours,

_____

_____

To the Municipal Mayor
Lubao, Pampanga

Our quotation is indicated opposite each articles indicated above

RUSSELITO B. JIMENEZ
Canvasser

_____
Printed Name