

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	PCS	5,000	SANITARY HEALTH I.D GREEN		
2	PCS	5,000	SANITARY HEALTH I.D CREAM		
3	PCS	3,000	SANITARY PERMIT		
4	SETS	5,000	SANITARY APPLICATION FORM		
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

Carvasser

To the Municipal Mayor
 Lubao, Pampanga

Our quotation is indicated opposite each articles indicated above

 Signature of Dealer

 Printed Name