



"Beyond Providing Water..."

Republic of the Philippines
SAN FRANCISCO WATER DISTRICT
San Francisco, Agusan del Sur

REQUEST FOR QUOTATION

Date: _____

Name of Establishment: _____

Address: _____

Contact Number: _____

Sir,

Please quote your price at the spaces hereunder corresponding to the articles called for under **Purchase Request No. 2024-09-0299** dated **September 20, 2024** to be delivered at SFWD Office within **7 calendar days from the receipt of Purchase Order.**


RUBEN M. JARABATA JR.
BAC Chairperson

ITEM NO.	QTY	UNIT	DESCRIPTION	UNIT PRICE	TOTAL
1	12	Box	Nitrile Gloves, 100pcs/box Size: Small Must be disposable or single use only Must be powderfree Must be latexfree Must be medical grade		
2	8	Box	Nitrile Gloves, 100pcs/box Size: Medium Must be disposable or single use only Must be powderfree Must be latexfree Must be medical grade		
3	15	Box	Surgical Mask, 50pcs/box Must be disposable or single use only Must be non-woven Must be 3-ply with earloop Medical grade		

TOTAL

I HEREBY CERTIFY that the above-listed articles are actually carried on stock by me and that the prices quoted are hereby specified. The terms and conditions of this call are hereby accepted. Time for delivery / pick up is within _____ () calendar days from receipt of the Purchase Order.


JOAN LADESMA

Canvasser

NAME & SIGNATURE OF BIDDER/DEALER

Nationality