



"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. 2025-02-0079** dated **February 24, 2025** 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	10	Box	Nitrile Gloves, 100pcs/box, Small Must be disposable or single use only Must be powderfree Must be latexfree Must be medical grade		
2	10	Box	Nitrile Gloves, 100pcs/box, Medium Must be disposable or single use only Must be powderfree Must be latexfree Must be 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