



"Beyond Providing Water..."

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

REQUEST FOR QUOTATION

Name of Establishment: _____
Address: _____
Contact Number: _____

Date: _____

Sir,

Please quote your price at the spaces hereunder corresponding to the articles called for under **Purchase Request No. 2025-03-0088** dated **March 7, 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	21	Box	Surgical Mask, atleast 50pcs per 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.


JAMES MARK G. BALABA

Canvasser

**NAME & SIGNATURE OF
BIDDER/DEALER**

Nationality