

**REQUEST FOR QUOTATION / PROPOSAL**

NATIONAL COUNCIL ON DISABILITY AFFAIRS

Date: October 19, 2020

*Name of Company*

RFQ No.: 202010051

NCDA Bldg., Isidora St., Brgy. Holy spirit, Q.C  
Telfax: 02 951-5925; Email: supply.ncda@gmail.com

PR No.: 20100335

*Complete Company Address*

PHILGEPS Ref. No.:

**To whom it may concern:**

Please quote your lowest price/s on the lot or item/s below, subject to General Conditions indicated herein, stating the shortest time of delivery and submit your quotation duly signed by your official representative not later than October 23, 2020 at 2:00 PM to the address listed above.

**Very truly yours,**

Myrla P. Sedenio  
BAC Chair / BAC Designate

**CANVASSERS'S CERTIFICATION**

*This is to certify that I have full knowledge, authority and responsibility in distributing and/or collecting the Request for Quotation in accordance to the guidelines in securing prices for the National Council on Disability Affairs.*

ALBERTO R. VILLA, JR.  
**AUTHORIZED CANVASSERS**

PLEASE QUOTE: **PER LOT/PER ITEM**

SUPPLIER/CONTRACTOR/CONSULTANT'S PROPOSAL BOX

No	ITEM DESCRIPTION (ITEM NAME&TECHNICALSPECIFICATIONS)	QTY.	UNIT	APPROVED BUDGET OF CONTRACT (ABC)	FINANCIAL PROPOSAL (Indicate the Price Offer)		TECHNICAL PROPOSAL (Indicate Brand/Model Offer)	
					Unit Price	Total Price	Yes	No
1	<b>Noise Isolating USB Headset With NCDA Logo</b>	50	Piece	<b>50,000.00</b>				
2	<b>Mug Thermos With NCDA Logo</b>	50	piece					

**GENERAL CONDITIONS**

- All entries must be typewritten and legible;
- Bidders must submit certificate of PHILGEPS Registration ; or
- Bidders must submit necessary business permits ( SEC, LGU, DTI , CDA, etc.);
- Place this RFQ in a sealed envelope and type the following details on the face of the envelope:  
  
*Your Company Name*  
*RFQ No.*  
*PR No.*  
*PHILGEPS Reference No.*
- Delivery period must be at least within seven (7) calendar days upon receipt of the Notice of Award(Indicate the days of delivery in the Bidder's Certificate box)
- Item/s delivered must have warranties for unit replacements, parts, labor or other services;
- Price validity shall be for a period of three(3) months;
- Quoted prices must be inclusive of taxes, and other charges or fees and shall not exceed the Approved Budget for the Contract(ABC);
- Transaction with (Name of Agency) shall mean compliance by the winning bidder with the bid and delivery requirements before the issuance of check payment;
- Failure to comply with these conditions shall mean disqualification of your bid proposal

**SUPPLIER/CONTRACTOR/CONSULTANTS  
CERTIFICATION**

Date: \_\_\_\_\_

*After having carefully read and accepted Your General Conditions, I/We quote you on the item/s at price/s noted above for immediate delivery and shipment which can be made in \_\_\_\_\_ days from receipt of the Notice of Award.*

\_\_\_\_\_  
**Print Name & Signature of  
Authorized Representative**

\_\_\_\_\_  
**Company Tel./Fax/Mobile No.**

\_\_\_\_\_  
**Company Tax Identification No. (TIN)**