

Standard Form Number: SF-GOOD-60

PR Number:

Revised on: May 24, 2004

**UNIVERSITY OF THE PHILIPPINES MINDANAO**

Mintal, Tugbok District, Davao City  
Fax No. (082)

**Request for Quotation**

Date:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sir/Madam:

Please quote your lowest price on the items listed below, subject to the General Conditions stated in the attached specifications and submit your quotation duly signed by your representative to UP Mindanao.

BAC Chair/Head of Unit

- Notes:
1. This price quotation must be written clearly and signed by authorized signatory.
  2. Delivery period must be within \_\_\_\_\_ days.
  3. Price validity shall be for a period of \_\_\_\_\_ calendar days.
  4. Documentary requirements must be submitted before issuance of Purchase Order.
  5. Please indicate if items will be delivered to UP Mindanao or for pick up.

ITEM NO.	ITEM & DESCRIPTION	QTY.	UNIT PRICE	TOTAL PRICE
	TOTAL			

After having carefully read and accepted your General Conditions, I/We quote you on the item at prices noted above.

Supplier: \_\_\_\_\_  
Tel. No/Cellphone No. \_\_\_\_\_  
Address: \_\_\_\_\_

Signature over Printed Name of Representative \_\_\_\_\_