



June 1, 2019

REQUEST FOR QUOTATION

Philippine Science High School – Central Luzon Campus (PSHS-CLC) wishes to invite proponent for the Supply and Delivery of Armchair in preparation for the growing population of PSHS-CLC with ABC of Six Hundred Forty-Six Thousand Pesos only in words and Php 646,600.00 in figures.

Details: P.R No. 2019-05-045-05

Item no.	Description	QTY	Unit	Price per unit	Supplier per unit
1	Right-Handed Armchair Specifications: Color: Gray Material: Virgin Resin and High-Grade Metal Seat With 450 mm Seat Depth: 400mm Front Legs Distance: 520mm Side Legs Distance: 459mm Side Legs Distance: 459mm Back Legs Distance: 515mm Back Rest Height: 727mm Seat Back Height: 300mm Seat Height: 419mm Gross Weight: 6.20kgs	300	Pcs.	1,900	
2	Left-Handed Armchair Specifications: Color: Gray Material: Virgin Resin and High-Grade Metal Seat With 450 mm Seat Depth: 400mm Front Legs Distance: 520mm Side Legs Distance: 459mm Side Legs Distance: 459mm Back Legs Distance: 515mm Back Rest Height: 727mm Seat Back Height: 300mm Seat Height: 419mm Gross Weight: 6.20kgs	40	Pcs.	1,900	

Proponent must deliver the items in PSHS-CLC
Proponent must be familiar with CDC regulations and policies
Proponent must be familiar with Government Transactions



Republic of the Philippines
Department of Science and Technology
PHILIPPINE SCIENCE HIGH SCHOOL – CENTRAL LUZON CAMPUS
Clark Freeport Zone, Pampanga
Tel. no. (045) 499 -0136

For more information, please contact the Bids and Awards Committee of PSHS-CLC: Tel no. (045) 499-0136 / (045) 499-5597 loc 105 or email us at clcbacsecrfq@gmail.com

Submissions will be accepted until **June 7 , 2019**, 9:00am at the PSHS- CLC, Lily Hill St., Clark Freeport Zone, Pampanga or through email at clcbacsecrfq@gmail.com

JARVIK JASON B. ROGACION
ADMINISTRATIVE OFFICER V/PROCUREMENT OFFICER
PHILIPPINE SCIENCE HIGH SCHOOL – CENTRAL LUZON CAMPUS
Telephone No. (045) 499 0136; (045) 499 5597 loc 105
EMAIL: clcbacsecrfq@gmail.com

Received on the date by:

Signature over printed name of Supplier's Representative

Supplier's Information

Name of Company/Supplier: _____

Designation: _____

Address of Company: _____

Contact Numbers: _____

Email Address: _____

TIN: _____