

## PAMANTASAN NG LUNGSOD NG MAYNILA

(University of the City of Manila)
Intramuros, Manila

## **REQUEST FOR PROPOSAL**

|                                                                                                                                                                   |                  |                      |                                        |                                 | Dat                                        | ·C.                                                                                                             |                                      |                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|----------------------|----------------------------------------|---------------------------------|--------------------------------------------|-----------------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------------|
|                                                                                                                                                                   |                  |                      |                                        |                                 | RFF                                        | P No.:                                                                                                          |                                      |                                       |
| Company Name:                                                                                                                                                     |                  |                      |                                        |                                 |                                            |                                                                                                                 |                                      |                                       |
| Address:                                                                                                                                                          |                  |                      |                                        |                                 |                                            |                                                                                                                 |                                      |                                       |
| TIN:                                                                                                                                                              |                  |                      |                                        |                                 |                                            |                                                                                                                 |                                      | *                                     |
| Business Permit No.:                                                                                                                                              |                  |                      |                                        |                                 |                                            |                                                                                                                 |                                      |                                       |
| PhilGEPS Cert. No.:                                                                                                                                               |                  |                      |                                        |                                 |                                            | "                                                                                                               |                                      |                                       |
| Please quote your best provided at the back portion of duly authorized representative Open quotations may be number indicated below.                              | f this<br>not la | request<br>ater thar | for quotation                          | . Submit yo<br><br>hrough facsi | ur quotation mile or email Or atty. RACHEL | duly signated at the signal | gned by<br>address<br>gned<br>ATRINA | y you or your s and contact A P. ABAD |
| After having carefully                                                                                                                                            | read a           | and acce             | pted the Terr                          | ns and Cond                     | Acting Chief<br>litions, I/We              |                                                                                                                 |                                      | ••                                    |
| After having carefully the item/s as follows:                                                                                                                     | read a           | and acce             | pted the Terr                          | ns and Cond                     | litions, I/We                              | submit                                                                                                          |                                      | ••                                    |
|                                                                                                                                                                   | read a           | Unit of              | Approved Budget for the Contract (ABC) | Pri                             | litions, I/We                              | OFFER Comp with Te Specifi                                                                                      |                                      | ••                                    |
| the item/s as follows:                                                                                                                                            |                  | Unit of              | Approved Budget for the Contract       | Pri                             | litions, I/We                              | OFFER Comp with Te Specifi                                                                                      | OUT QU                               | iotation/s for                        |
| the item/s as follows:  Item Description                                                                                                                          |                  | Unit of              | Approved Budget for the Contract       | Pri<br>(Inclusiv                | litions, I/We                              | OFFER Comp with Te Specifi (please                                                                              | our qu                               | iotation/s for                        |
| the item/s as follows:  Item Description  urchase of Musical Instruments                                                                                          |                  | Unit of              | Approved Budget for the Contract       | Pri<br>(Inclusiv                | litions, I/We                              | OFFER Comp with Te Specifi (please                                                                              | our qu                               | iotation/s for                        |
| Item Description  urchase of Musical Instruments rum Set ynthesizer Keyboard, high quality, rofessional, preferably 88-keys or elow, for use in professional band | Qty.             | Unit of<br>Issue     | Approved Budget for the Contract (ABC) | Pri<br>(Inclusiv                | litions, I/We                              | OFFER Comp with Te Specifi (please                                                                              | our qu                               | iotation/s for                        |
| the item/s as follows:                                                                                                                                            | Qty.             | Unit of Issue        | Approved Budget for the Contract (ABC) | Pri<br>(Inclusiv                | litions, I/We                              | OFFER Comp with Te Specifi (please                                                                              | our qu                               | iotation/s for                        |

E-Mail:

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Canvasser

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