

**PRICE QUOTATION FORM**

Company/Trader's Name: \_\_\_\_\_

Address: \_\_\_\_\_

<u>Item</u>	<u>Quantity</u>	<u>Unit</u>	<u>Description</u>	<u>Unit Price</u>	<u>Total Price</u>
1	4	units	Relocation of 3TR Split Type Aircon (Floor mounted) TMO-Capinpin Port of Lamao - Lobby Area - Finance Division - Gym/Temporary Admin Office *****nothing follows*****		
<b>Delivery :</b>			Shall be completed within seven (7) days from receipt of Purchase Order		

\_\_\_\_\_  
 Signature over Printed Name

\_\_\_\_\_  
 Mobile/Tel. No.

\_\_\_\_\_  
 Date