

______ , 20 _____

	PRICE QUOTA	TIO	N		
Sir/Madam:					
	quote your prices of the following articles which thi litation of Lateral Line 1"	s office	desire to	purchase f	for use in
ITEM #	PARTICULARS	QTY.	UNIT	UNIT COST	TOTAL COST
1	Supply of labor and materials for Rehabilitation of Lateral Line 1"	1	LS		
Dealer: TIN: VAT#: Address: Telephone No.: Contact Person: Canvasser: Sir/Madam:		NON-VAT#:			
	he honor to offer my prices for each of the above artic	les as ind	icated aft	er each iter Very tru	

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