

Request for Quotation



Quotation Due by (Date): 30-Mar

Name of supplier:	
Registration or Tax Identification Number:	

Date	PR No.
	KTM 2339

Item	Qty.	Unit	Description	Price per Unit	Extended Price	Terms of payment	Delivery schedule	Warranty	Validity of offer	Origin of Goods
1	1	JOB	Excel Training cost for Trainer (details in attached TOR)							
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
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14										
15										
16										
17										
18										
19										
20										

Mercy Corps V2017-09-28	Insurance+Shipping+Handling	
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For Mercy Corps use ONLY:

Verbal Quotation (check box if applicable)
(for Verbal Quotation, complete below Names, Titles & Signatures)

Collected by (staff 1):

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Approved by (Head of Operations):

Verbal quotation may be used only under specific circumstances (see FP3). The name, title and phone number of the supplier who communicated the quotation **MUST BE WRITTEN** by MC staff in the "Official Quote Provided by" cell. A Verbal quotation should **NOT** be signed by the supplier.

VAT ...%		<input type="checkbox"/> Additional information attached (please check box if true)
TOTAL:		
Delivery Address:	PAHAL Offices : Central , Regional and 14 PAHAL districts	

If the specifications are different or more detailed than the ones listed in the RFQ, a separate written Quote must be provided by the vendor instead of this RFQ. The Quote must include at least all information requested in this RFQ.

--- Supplier must provide Name/Title/Signature/Contact information and/or Stamp (or RFQ will not be considered) ---

Official Quote Provided By: (Address, Contact Information, Stamp and Signature)

Name: _____ Stamp: _____

Title: _____

Signature: _____

Contact Information (phone...): _____