

1. REQUEST NO. SRP-380-12-Q-0061 2. DATE ISSUED 07/25/2012 3. REQUISITION/PURCHASE REQUEST NO. PR1924404 4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG. 1 RATING

5a. ISSUED BY GSO/Contracting & Procurement 6. DELIVER BY (Date)

5b. FOR INFORMATION CALL (NO COLLECT CALLS) 7. DELIVERY  FOB DESTINATION  OTHER (See Schedule)

NAME Bernadette B. Legayada TELEPHONE NUMBER AREA CODE 632 NUMBER 301-2000 x 2975 9. DESTINATION

8. TO: a. NAME b. COMPANY b. STREET ADDRESS

c. STREET ADDRESS c. CITY

d. CITY e. STATE f. ZIP CODE d. STATE e. ZIP CODE

10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5a ON OR BEFORE CLOSE OF BUSINESS (Date) 08/09/2012 IMPORTANT: This is a request for information and quotations furnished are not offers. If you are unable to quote, please so indicate on this form and return it to the address in Block 5a. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or service. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotation must be completed by the quoter.

11. SCHEDULE (Include applicable Federal, State and local taxes)

ITEM NO. (a)	SUPPLIES/ SERVICES (b)	QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
	The US Embassy Manila invites you to submit a quotation for 2BR Service apartment for Laura Anikow and Family or 4BR Service apartment for Laura Anikow and Family  From: August 15 to September 24, 2012	2	unit		0.00
		1	unit		0.00

Approvals:  
NAGO:   
NVW: 

12. DISCOUNT FOR PROMPT PAYMENT  a. 10 CALENDAR DAYS (%) b. 20 CALENDAR DAYS (%) c. 30 CALENDAR DAYS (%) d. CALENDAR DAYS NUMBER PERCENTAGE

NOTE: Additional provisions and representations  are  are not attached.

13. NAME AND ADDRESS OF QUOTER a. NAME OF QUOTER b. STREET ADDRESS c. COUNTY d. CITY e. STATE f. ZIP CODE 14. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION 15. DATE OF QUOTATION 16. SIGNER a. NAME (Type or print) b. TELEPHONE AREA CODE c. TITLE (Type or print) NUMBER

**Subject:** SERVICE APARTMENT FOR LAURA ANIKOW AND FAMILY

**Document Summary:** The U.S. Embassy of Manila invites you to submit a quotation for our requirement below:  
2 unit 2 BR Service Apartment or 1 unit 4 BR Service Apartment

- From August 15-Sept 24, 2012 (40 nights)
- Family ( Husband, Wife and Children ages 12, 10 and 6)
- Non-smoking rooms
- Family owns a Labrador dog 50lbs.

**Note: Kindly advise if rate offered can be pre-terminated or cancelled at no extra cost. Otherwise, please provide an option.**

**Remarks:** Price offer shall be firm fixed-price, VAT exempt. The U.S. Government is exempt from paying the ad valorem/specific tax, customs and duties imposed by the Philippine Government under Section 106(a) and 109 of the Tax Code of 1997, respectively. Thus, price(s) shall be billed to the U.S. Government net of ad valorem tax, value added tax, customs and duties. Payment shall be made via Electronic Fund Transfer (EFT) within 30 days from receipt of the items ordered and the original copy of invoice. The Direct Deposit Sign Up Form for EFT payment will be provided to the vendor upon award. All items should be delivered to US Embassy Manila Seafront Compound, Pasay City. See attached document for further remarks, including applicable clauses.

The RFQ is valid until 1pm, 9 August 2012

**Instructions:** You may submit your firm fixed price (Exclusive of VAT) through e-mail to [LegayadaBB@state.gov](mailto:LegayadaBB@state.gov) or send through fax at +632 301-2964/62. For further queries, please get in touch with Ms. Dette Legayada at 301-2000 x 2975.

PR1924404 - 2 unit 2BR/ 1 unit 4BR Service Apartment for Laura Anikow & Family

I. Room Accommodation

	DESCRIPTION	ROOMS	CHECK-IN	CHECK-OUT	NIGHTS	COST/RM/NIGHT,PHP	TOTAL COST:
1	2 BR Service Apartment OR	2	8/15/2012	9/24/2012	40		0.00
2	1 4BR Service Apartment	1	8/15/2012	9/24/2012	40		0.00
TOTAL:							0.00
<p><b>Inclusions:</b> (pls. mark the columns with an "x" if the amenities are "yes", inclusive / "no" not inclusive with the room rate. Kindly fill up "cost of additional amenities / night" in non inclusive.</p>							
a	Non-Smoking Rooms	YES	NO	cost of additional amenities/night, PHP			TOTAL COST:
b	Family has a 50lbs Labrador dog						
c	(fill-in additional amenities as necessary)						
d							
e							
f							
g							
h							
TOTAL:							0.00
<b>TOTAL ROOM RATES, PHP:</b>							<b>0.00</b>

III. GRAND TOTAL:

TOTAL ROOM RATES, PHP:	0.00
<b>GRAND TOTAL , PHP:</b>	<b>0.00</b>