



DEPARTMENT OF FOREIGN AFFAIRS  
KAGAWARAN NG UGNAYANG PANLABAS  
OFFICE OF THE CONSULAR AFFAIRS

Date: 09 NOV 2023

**REQUEST FOR QUOTATION OF PRICES**

Sir/Madam:

Please submit your formally detailed lowest price quotation form/letter for the following items individually described below, subject to the following conditions:

1. Formal Quotations submitted to this office will be considered final offer. In the event that the price is acceptable, a properly accomplished and approved PURCHASE ORDER or JOB ORDER will be served to the supplier/contractor. The delivery date will be indicated in the Purchase/Job Order.
2. The Department hereby reserves the right to reject any/all offers; and accept any/all offers it may consider most economical and advantageous to the Government.
3. Goods/Services supplied and delivered shall be subject to the usual inspection by the Department's Internal Auditor or duly authorized representative and
4. Payment will only be effected by strict compliance with the usual prescribed accounting and auditing requirements.
5. Payment shall be made thirty (30) days upon receipt of complete documents which include sales invoice, delivery receipt and provisional receipt
6. Deadline for Submission of Quotation: 14 NOV 2023 at 12:00nn

QUANTITY	UNIT	PARTICULARS	AMOUNT
10	LICENSES	<b>Graphic Design Online Platform Subscription</b> <ul style="list-style-type: none"><li>- 1-year License</li><li>- Pro Subscription</li><li>- Unlimited access to premium templates and 100+ million premium stock photos, videos, audio, graphics, and more</li><li>- Resize designs infinitely</li><li>- Remove image and video backgrounds in one click</li><li>- Automatically match your video footage to your soundtrack with Beat Sync</li><li>- More AI-powered design tools• (Magic Eraser, Magic Write, Beat Sync, and more)</li><li>- Cloud storage (1TB)</li><li>- 24/7 customer support<ul style="list-style-type: none"><li>- ISO 27001 certification and compliance</li><li>- SSO</li></ul></li></ul>	
			ABC: Php50,000.00

**Company Name / Supplier:**

**Address and Telephone Number:**

**Contact Person:**

**DYAN KRISTINE B. MIRANDA-PASTRANA**

Acting Director