

NAME AND ADDRESS OF REQUESTING AGENCY	AGENCY ACCT. CODE
	AGENCY CONTROL NO.
AGENCY PROCUREMENT REQUEST	
	PS APR No.

To. THE PROCUREMENT SERVICE
DBM Compound, RR Road
Cristobal St., Paco Manila

ACTION REQUESTED ON THE ITEM LISTED BELOW

Please furnish with us the Price Estimate (for office equipment/furniture & supplementary items)

Please purchase for our agency/furniture/supplementary items per you Price Estimate
(PS RAD No. _____ attached) dated _____

Please issue common-use supplies/materials per price list as of _____

Please issue Certificate or Price Reasonableness

Please furnish us with your latest/updated Price List

Other (Specify) _____

IMPORTANT!! PLEASE SEE THE INSTRUCTION/CONDITIONS AT THE BACK OF ORIGINAL COPY

ITEM No.	ITEM AND DESCRIPTION/SPECIFICATIONS/STOCK NO.	QTY	UNIT	UNIT PRICE	AMOUNT

Total AMOUNT

NOTE: ALL SIGNATURE MUST BE OVER PRINTED NAME

STOCKS REQUESTED ARE CERTIFIED TO BE WITHIN THE APPROVED PROGRAM:	FUNDS CERTIFIED AVAILABLE	APPROVED:
Supply Officer	Accountant	Authorized Official

FUNDS DEPOSITED WITH PS CHECK No. _____
IN THE AMOUNT OF _____ (P _____) ENCLOSED