



## REQUEST FOR QUOTATION



Procurement Request Number(s)	PR-SUD-GDF-2025-012	RFQ Issue Date (MM/DD/YYYY):	June 18, 2025				
		Quotation Due Date (MM/DD/YYYY):	June 22, 2025				
SUPPLIER INFORMATION:		RETURN QUOTATION TO:					
Vendor Name		Alight					
Point of Contact:		Point of Contact:	Ahmed Bushara Yagoub				
E-mail:		E-mail:	Ahmedy@wearealight.org				
Phone:		Phone:	,0917200643				
Mobile:		Mobile:	,0117448537				
Address:		Address:	ALIGHT Gadarif Office				
Date items required by (MM/DD/YYYY):		June 30, 2025					
Delivery address:		ALIGHT Gadarif Office					
Means of delivery:		Supplier Preferences					
Payment terms:		After Full Delivery and GRN Confirmation					
Supplier to Complete (Or Attach Official Company Quote)							
Line item no.	Description of Goods / Services (Add attachment with detailed technical specs as needed)	Unit / Form	Quantity Requested	Currency	Unit Price	Total Price (Formula)	Availability date (MM/DD/YY)
1	Sugar 10 KG	Sack	400	SDG			
2	Flour 10 KG	Sack	400	SDG			
3	Milk Powder 2,25 KG	Sack	400	SDG			
4	Sweet (Halawa Tahenea) 3 KG	PC	400	SDG			
5	Macaroni (NOBO)	Carton	400	SDG			
6	Tea Biscuit	Carton	400	SDG			
7	Lintel 10 KG	Sack	400	SDG			
NOTE	BANK ACCOUNT DETAILS: Either the account of the company or the company owner.						
	ACCOUNT NAME:						
	ACCOUNT NO:						
	BANK NAME:						
				Subtotal			
				Tax (if applicable)			
				Delivery charge (if applicable)			
				Other charges (if applicable)			
Additional information required from supplier:				TOTAL			
[1] Quote validity period (days)				Preparer			
[2] Possible alternatives if exact goods are unavailable				Name:			
[3] Delivery lead time (days) from signed PO/Contract				Title:			
[4] Item Warranty Informations				E-mail:			
Vendor Confirmation				Vendor Stamp			
Name:							
Title:							
Signature:							
Date (MM/DD/							