			MUNICIPALITY Republic of th				
			Province of Da				
				_	RFQ No.		20221019
				_	PR No.		100-22-11-1222
					Date		11/7/2022
				_	Page		1/2
Sir/I	Madam:	•			Requesitioning Office:		Mo-comelec
REG WHI AWI BE C LATI	ULATIO ICH THE ARDS CO OFFICIAL E DELIVE	NS, PLEA MUNICI DMMITTI LY NOTII	PERTINENT PROVISION OF REPUBLIC A SE QUOTE YOUR UNIT, TOTAL AND GE PALITY OF KAPALONG, DAVAO DEL NO SE FIND YOUR PRICE REASONABLE, RE FIED AS TO THE DATE OF DELIVERY. IN QUIDATED DAMAGES SHALL BE IMPOS ONS.	RAND/LOT PRICE PRTE DESIRES TO SPONSIVE AND I CASE THERE IS A	OF THE ITM PURCHASE LOWEST IN A FAILURE O	MES LISTED F E. SHOULD TI THE MARKE OF DELIVERY	HEREUNDER, HE BIDS AND T, YOU WILL AND/OR
tem	Qty.	Unit	Description Description	ABC	Unit	Total	Remarks &
No.	Qty.	Ome	Description	7150	Price	Price	Date of Delivery
1	30	bot	Toilet Bowl Cleaner	342.00		11111	
2	20	kls	Sugar	70.00			
3	30	bag	3 in 1 Coffee(30's)	226.00			
4	30	bag	Coffee Stick (48's)	115.00			
5	10	_	Tarpauline(8x5)	500.00			
6		pcs	•				
	50		Detergent Powder 65'G	80.00			
7	50	pcs	Detergent Bar (130'G)	11.00			
8	50	pcs	Diswashing Paste(400'G)	50.00			
9	30	pcs	Disinfectant Spray(510'G)	636.00			
			Cont. next page				
	SUPP	LIERS M	UST SPECIFY/INDICATE				
	BRAN	ID NAM	ES UPON QUOTATION				
, 45	REBY CI	EDTIEV.		4	(SGD.)	MARY ELIZA BAC-Chairp	BETH L. EXALA person
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TEL.	NO.:			-		SIGNATU	JRE
		PRINTED NAME					
CANVASS BY:			 Signature Over Printed Name			POSITIO	DN
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			Province of Dav	vao del Norte RFQ No. PR No. Date Page			20221019 100-22-11-1222 11/7/2022 2/2
Sir/I	Madam:	:			Requesitioni	ing Office:	Mo-comelec
REG WHI AWA BE G LATI	CULATIO ICH THE ARDS CO OFFICIAL E DELIVI	NS, PLEA MUNICI OMMITTI LLY NOTII	PERTINENT PROVISION OF REPUBLIC AC ISE QUOTE YOUR UNIT, TOTAL AND GR. PALITY OF KAPALONG, DAVAO DEL NO EE FIND YOUR PRICE REASONABLE, RES FIED AS TO THE DATE OF DELIVERY. IN O QUIDATED DAMAGES SHALL BE IMPOSE ONS.	AND/LOT PRICE RTE DESIRES TO PONSIVE AND CASE THERE IS	OF THE ITM PURCHASE LOWEST IN A FAILURE C	MES LISTED I E. SHOULD T THE MARKE OF DELIVERY	HEREUNDER, HE BIDS AND T, YOU WILL 'AND/OR
tem		Unit	Description	ABC	Unit	Total	Remarks &
No.					Price	Price	Date of Delivery
10	50		Alcohol	600.00			
11	30	Pack	Tissue 12 pcs/pack	110.00			
12	30	box	KN95 face Mask (10's)	84.00			
13	3	pcs	Mop w/handle	150.00			
14	30	box	Gloves Disposable (100's)	360.00			
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			7.14	06 400 00			<u> </u>
			Total Approved Budget Contract	96,490.00			1
			IUST SPECIFY/INDICATE				
I UE	BRAND NAMES UPON QUOTATION (SGD.) MARY ELIZABETH L. EXA BAC-Chairperson HEREBY CERTIFY:						
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		STABLIS	нмент:	<u>.</u>			
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САЛ	IVASS B	Υ:	Signature Over Printed Name			POSITIO	ON