

**REPUBLIC OF THE PHILIPPINES**  
**MUNICIPALITY OF KAPALONG**  
**Province of Davao del Norte**

RFQ NO. 20230017  
 PR No. 100-23-01-0037  
 Date 1/26/2023  
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Sir/Madam:

**Requesting Office:** VICE MAYOR OFFICE

PURSUANT TO THE PERTINENT PROVISION OF REPUBLIC ACT NO. 9184 AND IT'S IMPLEMENTING RULES AND REGULATIONS, PLEASE QUOTE YOUR UNIT, TOTAL AND GRAND/LOT PRICE OF THE ITEMS LISTED HEREUNDER, WHICH THE MUNICIPALITY OF KAPALONG, DAVAO DEL NORTE DESIRES TO PURCHASE. SHOULD THE BIDS AND AWARDS COMMITTEE FIND YOUR PRICE REASONABLE, RESPONSIVE AND LOWEST IN THE MARKET, YOU WILL BE OFFICIALLY NOTIFIED AS TO THE DATE OF DELIVERY. IN CASE THERE IS A FAILURE OF DELIVERY AND/OR LATE DELIVERIES, LIQUIDATED DAMAGES SHALL BE IMPOSED AND BE CHARGED AGAINST YOUR PRESENT OR FUTURE TRANSACTIONS.

tem	Qty.	Unit	Description	ABC	Unit Price	Total Price	Remarks & Date of Delivery
1	100	bot	Rubbing Alcohol- 500 ml	98.00			
2	10	can	Air Freshener- 280 ml/can	250.00			
3	15	can	Disinfectant spray- 510ml/can	636.00			
4	5	can	Furniture Cleaner- 500ml/can	281.00			
5	5	bot	Toilet Bowl Cleaner- 1000ml/bot	342.00			
6	2	pack	Detergent powder- 1kl/pack	103.00			
7	20	pack	Bathroom soap- 130g/pack	46.00			
8	50	roll	Trash Bag- 10pcs/roll xxl	122.00			
9	75	box	Bottled water- 350ml/bot- 40 bot/box	352.00			
10	50	bag	Assorted biscuits- 10 packs/bag	70.00			
11	45	pack	Coffe 3n1- 36 sachet/pack	255.00			
12	130	sachet	Fabric conditioner- 40ml/sachet	9.00			
13	30	pc	Toilet Desorant cake- 100g	54.00			
<b>TOTAL APPROVED BUDGET CONTRACT</b>				<b>74,996.00</b>			

**SUPPLIERS MUST SPECIFY/INDICATE  
 BRAND NAMES UPON QUOTATION**

**(SGD.) MARY ELIZABETH L.EXALA**  
 BAC-Chairperson

**I HEREBY CERTIFY:**

- 1) THE ABOVE PRICES OF THE ITEMS HEREIN DESCRIBED ARE CURRENT AND VALID FOR 60 DAYS FROM DATE OF THE OPENING OF CANVASS.
- 2) IN CASE THE MUNICIPALITY OF KAPALONG, DAVAO DEL NORTE WILL OFFICIALLY NOTIFY THAT THE ITEMS WILL BE PRODUCED FROM MY/OUR ESTABLISHMENT, THE STOCKS ARE READILY AVAILABLE OFF THE SHELF.

**NAME OF ESTABLISHMENT:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**TEL. NO.:** \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINTED NAME

**CANVASS BY:** \_\_\_\_\_

Signature Over Printed Name

\_\_\_\_\_  
POSITION



