

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

RFQ NO. 20230848
PR No. 100-23-09-1035
Date 9/19/2023
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Sir/Madam:

**Requesting Office: MAYOR'S OFFICE
MPOC**

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.

Item No.	Qty.	Unit	Description	ABC	Unit Price	Total Price	Remarks & Date of Delivery
1	135	pax	SNACKS 135pax X 75/snacks X 2snacks x 3days	75.00			
2	135	pax	MEALS 135pax X 250/meal x 3days	250.00			
			Menu:				
		DAY 1	Snacks AM: Cheese Cake and Juice				
			Lunch: Beef Steak,Pancit Guisado, Rice,Softdrinks or Bottled Water				
			Snacks Pm: Special Banana Cake and Juice				
		DAY 2	Snacks Am: Special Ensaymada and Juice				
			Lunch: Fish Escabeche,Buttered Chicken,Rice,Softdrinks or Bottled Water				
			Snacks Pm: Pancit Guisado w/ Bread and Softdrinks				
		Day 3	Snacks Am: Egg Sandwich and Softdrinks				
			Lunch: Beef Steak w/ Vegetable, Fish Fillet,Rice,Softdrinks or Bottled Water				
			Snacks Pm: Burger and Juice				
			TOTAL APPROVED BUDGET CONTRACT	162,000.00			

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

