| | | | REPUBLIC OF TH | HE PHILIPPINE | S | | | | | |
|--------|--------------------------|----------|---|------------------|--------------|---------------|------------------|--|--|--|
| | MUNICIPALITY OF KAPALONG | | | | | | | | | |
| | | | Province of Da | ivao del Norte | | | | | | |
| | | | | | RFQ NO. | | 20230960 | | | |
| | | | | - | PR No. | | 100-23-10-1180 | | | |
| | | | | - | Date | | 10/25/2023 | | | |
| | | | | _ | Page | | 1/1 | | | |
| | | | | | ruge | | 1/1 | | | |
| Sir/ | Madam. | : | | | Requestio | ning Office: | МНО | | | |
| PUF | RSUANT | ТО ТНЕ | PERTINENT PROVISION OF REPUBLIC ACT | T NO. 9184 AND | IT'S IMPLEI | MENTING RU | LES AND | | | |
| REG | GULATIO | NS, PLE | EASE QUOTE YOUR UNIT, TOTAL AND GRA | ND/LOT PRICE C | OF THE ITEN | IS LISTED HER | REUNDER, | | | |
| WH | ICH THE | MUNIC | CIPALITY OF KAPALONG, DAVAO DEL NOR | TE DESIRES TO F | PURCHASE. | SHOULD THE | BIDS AND | | | |
| AW. | ARDS CO | OMMIT | TEE FIND YOUR PRICE REASONABLE, RESP | ONSIVE AND LO | WEST IN TH | IE MARKET, Y | OU WILL | | | |
| | | | TIFIED AS TO THE DATE OF DELIVERY. IN CA | | | | • | | | |
| | | | IQUIDATED DAMAGES SHALL BE IMPOSED | O AND BE CHAR | GED AGAIN | ST YOUR PRES | SENT OR | | | |
| - | URE TRA | _ | - | 400 | | | 2 / 2 | | | |
| tem | Qty. | Unit | Description | ABC | Unit | Total | Remarks & | | | |
| No. | 100 | byra | Augladiais a 40ma | 150.00 | Price | Price | Date of Delivery | | | |
| 1 | 100 | bxs | Amlodipine 10mg | 150.00 | | | | | | |
| 2 | 245 | bxs | Losartan 50mg | 240.00 | | | | | | |
| 3 | 240 | bxs | Losartan 100mg | 270.00 | | | | | | |
| 4 | 50 | bxs | Albendazole (400g) 100tabs | 1,026.00 | | | | | | |
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| | | | | | | | | | | |
| | | | TOTAL APPROVED BUDGET CONTRACT | 189,900.00 | | | | | | |
| | C | ו וממו ו | | 103,300.00 | | | | | | |
| | | | ERS MUST SPECIFY/INDICATE | | | | | | | |
| | В | SKANL | D NAMES UPON QUOTATION | j | | | | | | |
| | | | | | (SGD. | | ABETH L.EXALA | | | |
| l, ,,, | REBY CL | TOTICV. | | | | BAC-Chairp | person | | | |
| l nr | | | PRICES OF THE ITEMS HEREIN DESCRIBED ARE | CLIPPENT AND V | ALID EOR 60 | DAVC EDOM F | NATE | | | |
| | , | | G OF CANVASS. | CONNLINI AIVE V | ALID I ON 60 | DAISTROW | JATE | | | |
| | | | O OF CANVASS. MUNICIPALITY OF KAPALONG, DAVAO DEL NO | ORTF WILL OFFICE | ALLY NOTIFY | THAT THE ITE | MS WILL BE | | | |
| | • | | OM MY/OUR ESTABLISHMENT, THE STOCKS AR | | | | | | | |
| | | | • | | | | | | | |
| NAI | ME OF E | STABLI | SHMENT: | • | | | | | | |
| ADI | DRESS: | | | _ | | | | | | |
| TEL. | . NO.: | | | | | | | | | |
| | | | | _ | | SIGNATU | JRE | | | |
| | | | | | | | | | | |
| | | | | | | PRINTED N | IAME | | | |
| CAN | VVASS B | Y: | Signature Over Printed Name | - | | DOCITIO | 201 | | | |
| | | | Signature Over Printed Name | | | POSITIO | JIV | | | |