

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

RFQ NO. 20240594
PR No. 100-24-06-0747
Date 6/28/2024
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Sir/Madam:

Requesting Office: MHO

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
Meals and Snacks: Day 1							
1	70	pax	AM Snacks: Empanada and canned juice	50.00			
2	70	pax	Lunch: Buttered chicken, Fish Fillet, Pancit, Rice, and bottled water	250.00			
3	70	pax	PM Snacks: Mamon cake and canned juice	50.00			
Meals and Snacks: Day 2							
4	70	pax	AM Snacks: Mamon cake and bottled juice	50.00			
5	70	pax	Lunch: Pork adobo, Lumpiang shanghai, chopsuey, Rice, and bottled water	250.00			
6	70	pax	PM Snacks: Ensaymada and bottled juice	50.00			
Meals and Snacks: Day 3							
7	70	pax	AM Snacks: Bihon w/ bread and softdrinks	50.00			
8	70	pax	Lunch: Pork humba, Lumpiang shanghai, chicken adobo, Rice, and bottled water	250.00			
9	70	pax	PM Snacks: Bihon w/ bread and softdrinks	50.00			
TOTAL APPROVED BUDGET CONTRACT				73,500.00			

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

POSITION

CANVASS BY: _____
Signature Over Printed Name
