			REPUBLIC OF TH MUNICIPALITY (Province of Da	OF KAPALONG	S		
					RFQ NO. PR No. Date Page		20240972 100-24-10-1174 10/18/2024 1/2
Sir/	Madam	<i>:</i>			Requestio	ning Office:	мно
REG WH AW BE G LAT	OLATIO ICH THE ARDS CO OFFICIAL	NS, PLE MUNIC DMMIT LY NOT ERIES, L	PERTINENT PROVISION OF REPUBLIC ACT TASE QUOTE YOUR UNIT, TOTAL AND GRAI CIPALITY OF KAPALONG, DAVAO DEL NORT TEE FIND YOUR PRICE REASONABLE, RESPO TIFIED AS TO THE DATE OF DELIVERY. IN CA IQUIDATED DAMAGES SHALL BE IMPOSED TIONS.	ND/LOT PRICE C TE DESIRES TO F ONSIVE AND LO ASE THERE IS A F	OF THE ITEM PURCHASE WEST IN THE FAILURE OF	1S LISTED HEF SHOULD THE HE MARKET, Y DELIVERY AN	REUNDER, BIDS AND 'OU WILL ID/OR
tem	Qty.	Unit	Description	ABC	Unit	Total	Remarks &
No.					Price	Price	Date of Delivery
1	40	bots	Amoxicilin 250mg/5ml/60ml	52.00			
2	10	bxs	Amoxicilin 500mg/caps 100's	340.00			
3	15	bxs	Cetirizine 10mg/tab 100's	288.00			
4	30	bxs	Cetirizine 10mg/5ml 60ml	42.00			
5	8	bxs	Mefinamic Acid 500mg (caps/100's)	280.00			
6	15	bxs	Paracetamol 500mg/tab 100's	140.00			
7	50	bots	Paracetamol 250mg/5ml 60ml	28.00			
8	30	bots	Paracetamol Drops 100mg/ml	35.00			
9	8	bxs	Doxycycline 100mg/cap 100's	550.00			
10	13	bots	Calamine Lotion 60ml	110.00			
11	30	bxs	Zinc Sulfate Syrup	55.00			
12	20	bxs	Zinc Sulfate Drops	60.00			
			CONT.NEXT PAGES				
I HE	REBY CI	BRANI ERTIFY: ABOVE P	PRICES OF THE ITEMS HEREIN DESCRIBED ARE G OF CANVASS.	CURRENT AND V		BAC-Chair	
	PRODU	CED FRO	MUNICIPALITY OF KAPALONG, DAVAO DEL NO IM MY/OUR ESTABLISHMENT, THE STOCKS AR				EMS WILL BE
	NO.:			, ,		SIGNATI	URE
CAN	IVASS B	Y :		-		PRINTED N	NAME

Signature Over Printed Name

POSITION

			REPUBLIC OF TH MUNICIPALITY Province of Da	OF KAPALONG	S		
						RFQ NO. PR No: Date: Page:	20240972 100-24-10-1174 10/18/2024 2/2
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tem	Qty.	Unit	Description	ABC	Unit	Total	Remarks &
No.	4.5	1	0 0	250.00	Price	Price	Date of Delivery
13	15	bxs	Oral Dehydration salt (ORS) 25's	250.00 165.00			
14	40	bots		180.00			
15 16	3 23	bxs	Dicycloverine 10mg/tab 100's	42.00			
17		bots	Dicycloverine 10mg/5ml 60ml	150.00			
18	35 40	bxs	Amlodipine 5mg/tab 100's Amlodipine 10mg/tab 100's	170.00			
19	8	bxs		450.00			
	8	bxs	Multivitamins Capsule 100's	380.00		<u> </u>	
20	28	bxs	Vit. B Complex/ tab 100's	260.00			
21 22	28	bxs	Losartan 50mg/tab 100's	350.00		-	
23		bxs	Losartan 100mg/tab 100's			<u> </u>	
		bxs	Hyoscine Butylbromide 10mg/tab 100's	597.00		<u> </u>	
24 25	6	bxs	Carbocistine 500mg/capsule 100's PPA Tablet 100's	310.00			
25	7	bxs	TOTAL APPROVED BUDGET CONTRACT	321.00 80,000.00		<u> </u>	
	SU	PPI IFF	R MUST SPECIFY/INDICATE	80,000.00			
			IAMES UPON QUOTATION				
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NAI	ME OF E	STABLIS	SHMENT:	•			
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