

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

RFQ NO. 20241029  
PR No. 100-24-11-1272  
Date 11/5/2024  
Page 1/1

Sir/Madam:

**Requesting Office: MDRRMO**

*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	37	pcs	EMERGENCY GO Bag	3,500.00			
			Specifications:				
			Customized Backpack, Waterproof				
			Reflectorized Accent.				
			Color: Gray and Orange Combination with MDRRM Logo and text as designed by end-user				
			Inclusions:				
			First Aid Kits (Band Aid, Gause pad, Cotton, Agua Oxinada, Bitadine, Micro Tape Hygiene Kit (Soap, Toothpaste, Toothbrush, Shampoo, Diswashing liquid 1 1/4 Powder Tide, Tissue, Alcohol, Cotton, Soap Bar, Napkin, Glashlight with spare batteries, easy to eat food (3 cans canned goods, 1 pack cereal, 1 bottle drinking water (1 ltr)				
			1 pc Blankets				
			<b>TOTAL APPROVED BUDGET CONTRACT</b>	<b>129,500.00</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



