PO	YONG

Republic of the Philippines

Province of Davao del Norte

BIDS AND AWARDS COMMITTEE

Government Center, Mankilam, Tagum City

PR Number : 2106-3072

Quotation No. : C20212712 Date : <u>June 14, 2021</u>

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PURSUANT TO THE PERTINENT PROVISION OFREPUBLIC ACT NO. 9184 AND ITS IMPLEMENTING RULES AND REGULATIONS, PLEASE QUOTE YOUR UNIT, TOTAL AND GRAND/LOT PRICE OF THE ITEMS LISTED HEREUNDER, WHICH THE PROVINCE OF 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. THE PROVINCIAL GOVERNMENT OF DAVAO DEL NORTE RESERVES THE RIGHT TO ACCEPT OR REJECT ANY BID, TO ANNUL THE BIDDING PROCESS, AND TO REJECT ALL BIDS ANY TIME PRIOR TO CONTRACT AWARD, WITHOUT THEREBY INCURRING ANY LIABILITY TO THE AFFECTED BIDDER/S.

Item No.	Qty./Unit	Item	Quotation				
			N,			Amount	
1	200 rolls	TIE BOX					
2	1,000 pcs	EMPTY SACKS					
		50kls capacity					

* * * GRAND/LOT PRICE : P

The following documentary requirements shall be submitted together with the Price Quotation Form or Canvass as requisite for award: a) Mayor's/Business Permit b) PhilGEPS Registration Number

For use of PSWDO in packing of relief goods				
Approved Budget for the Contract : P26,000.00				
PLACE OF DELIVERY : PGSO Warehouse				
DATE OF OPENING OF CANVASS: June 17, 2021	_			
TIME OF OPENING OF CANVASS: 09:00:00 AM	- VERY TRULY YOURS,			
SUPPLIERS MUST SPECIFY/INDICATE BRAND NAMES UPON QUOTATION				
Failure to specify, may be a ground for disqualification.	JOSEPH NILO F. PARREÑAS,MD			
THE WINNING BIDDER SHALL BE REQUIRED TO SUBMIT A WARRANTY SECURITY/CERTIFICATE DURING DELIVERY OF THE ITEM.	(Acting PGSO)			
2) IN CASE THE PROVINCE OF DAVAO DEL NORTE WILL O BE PROCURED FROM MY/OUR ESTABLISHMENT, THE STOO				
NAME OF ESTABLISHMENTADDRESS	-			
Please check V.A.T. PhilGEPS Registration No.:				
or Non-VAT	SIGNATURE			
T.I.N. No TEL./FAX No. :	PRINTED NAME			
CANVASS BY:				
Signature Over Printed Name	POSITION			