

**Republic of the Philippines**  
**Province of Davao del Norte**  
**BIDS AND AWARDS COMMITTEE**  
Government Center, Mankilam, Tagum City

Quotation No. : C20213774

Date : August 13, 2021

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PR Number : 2108-4282

PURSUANT TO THE PERTINENT PROVISION OF REPUBLIC 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 BIDDERS.

Item No.	Qty./Unit	Item	Quotation	
			Unit Price	Total Amount
1	150 BOX	BRANDED AZITHROMYCIN 500MG TAB 3'S	_____	_____
2	120 BOX	BRANDED COTRIMOXAZOLE 800MG TAB 100'S	_____	_____
3	126 BOX	BRANDED ISONIAZID 300MG TAB 100'S	_____	_____
4	80 BOX	BRANDED MULTIVITAMINS + IRON CAP 100'S	_____	_____
5	65 BOX	BRANDED SODIUM ASCORBATE CAP 100'S	_____	_____

Remarks : **-ALL BIDDERS MUST SPECIFY/INDICATE BRAND NAME OF THEIR PRODUCTS**  
**-ALL BIDDERS ARE REQUIRED TO ATTACH CPR**  
**-TO BE DELIVERED 10 CALENDAR DAYS UPON RECEIPT OF P.O**  
**-NO PARTIAL DELIVERY IS ACCEPTED & NO REQUEST FOR EXTENTION BE GRANTED**  
**- TO BE AWARDED IN LOT PRICE BASIS**  
**-ALL MULTIVITAMINS CAP.& SYRUP WITH NO APPROVED THERAPEUTIC CLAIM LABEL IS NOT ACCEPTED**

FOR USE OF PHO PREVENTION AND CONTROL OF STI,HIV AND AIDS.

Approved Budget for the Contract : P 225,678.00

PLACE OF DELIVERY : PGSO Warehouse

DATE OF OPENING OF CANVASS: August 19, 2021TIME 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.**

**ENGR. GLENN A. OLANDRIA**  
(Provincial Engineer)

I HEREBY CERTIFY:

- 1) THE ABOVE PRICES OF THE ITEMS HEREIN DESCRIBED ARE CURRENT AND VALID FOR 120 DAYS FROM DATE OF THE OPENING OF CANVASS.
- 2) IN CASE THE PROVINCE OF DAVAO DEL NORTE WILL OFFICIALLY NOTIFY THAT THE ITEMS WILL BE PROCURED FROM MY/OUR ESTABLISHMENT, THE STOCKS ARE READILY AVAILABLE OFF-THE-SHELF.

NAME OF ESTABLISHMENT \_\_\_\_\_

ADDRESS \_\_\_\_\_

Please check whether VAT  V.A.T.  
or Non-VAT  Non-V.A.T.

PhilGEPS Registration No.: \_\_\_\_\_

T.I.N. No. \_\_\_\_\_ TEL./FAX No. : \_\_\_\_\_

SIGNATURE

PRINTED NAME

CANVASS BY: \_\_\_\_\_

Signature Over Printed Name

POSITION

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Table with 4 columns: Item No., Qty./Unit, Item, and Quotation (Unit Price | Total Amount)

-WINNING BIDDERS WILL BE THE ONE TO SHOULD THE PAYMENT FOR BFAD SAMPLING
-ALL DELIVERED SUPPLIES MUST BE AT LEAST 1 YEAR OR MORE PRIOR TO ITS EXPIRY DATE

\* \* \* GRAND/LOT PRICE : P

Terms and Condition :
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

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NAME OF ESTABLISHMENT
ADDRESS
Please check whether VAT or Non-VAT
V.A.T.
Non-V.A.T.
PhilGEPS Registration No.:
T.I.N. No.
TEL./FAX No. :

SIGNATURE
PRINTED NAME
POSITION

CANVASS BY:
Signature Over Printed Name