



Republic of the Philippines  
**CITY OF ROXAS**  
City Hall, Roxas City 5800  
(036) 620-5220



**BIDS AND AWARDS COMMITTEE OFFICE**

Date: NOV 28 2023  
Quotation No. QN- 0666

Please quote your lowest price on the item/s listed below, subject to the General Conditions on the last page, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than NOV 30 2023 08:00 a.m.

  
**LORIE BELLE O. USISON**  
BAC Chairperson

**REMINDERS:**

1. Delivery period within 10 calendar days
2. Warranty shall be for a period of six (6) months for supplies & materials, one (1) year for equipment, from date of acceptance by the procuring entity
3. Price validity shall be a period of 60 calendar days
4. G-EPS registration certificate shall be attached upon submission of the quotation
5. Bidders shall submit original brochures showing certifications of the product being offered.
6. Please submit / attach updated certificate of supplier's registration or eligibility documents and additional requirements on sale of health-related goods and services.
7. All prices are inclusive of all applicable duties, government permits, fees, and other charges relative to the acquisition and delivery of items to City Government of Roxas.
8. In case of discrepancy over the amounts in words and in figures, the amount in words will prevail.
9. The end-user shall have the right to inspect and/or to test the goods if it's in accordance with the technical specifications.
10. In case of delay in the delivery, the supplier shall pay a penalty of one-tenth of one percent (1/10 of 1%) of the corresponding contract price for each day of delay, including non-working holidays (i.e. Saturday and Sunday), legal holidays or special non-working holidays.
11. Other terms and conditions shall be applied in accordance with the IRR of RA 9184.

**INSTRUCTIONS:**

1. Accomplish this RFQ correctly and accurately.
2. Do not alter the contents of this form in any way.
3. Technical specifications are mandatory. Failure to comply with any requirements will disqualify your quotation.
4. Failure to follow these instructions will disqualify your entire quotation.
5. Supplier can propose in one or two lots. However, the supplier shall quote for all items in the specified lot, including sub-sections, otherwise, the quotation shall be automatically disqualified.

Received by:

\_\_\_\_\_  
Signature over Printed Name

\_\_\_\_\_  
Company Name

**Title & ABC: Procurement of Food, Venue and Hotel Accommodation for Capacity Building and Re-Orientation of Division Composition with an ABC of One Hundred Thirty-One Thousand Four Hundred Pesos (PHP 131,400.00)**

<b>ITEM NO.</b>	<b>ITEM &amp; DESCRIPTION</b>	<b>BRAND</b>	<b>UOM</b>	<b>QTY.</b>	<b>UNIT PRICE</b>	<b>TOTAL PRICE</b>
1	<b>Food with Venue and Hotel Accommodation</b>		pax	65		
	<b>Note:</b> *Lunch to serve with soup, 2-3 main dish, vegetable, dessert and drinks					
	<b>Snacks</b>					
	*Carbonara                      *Lomi with Bread					
	*Arroz Caldo w/ egg    *Sotanghon Guisado					
	*Hamburger                      *Wit-wit					
	*Spaghetti                      *Bam-I with bread					
	*Palabok with bread    *Tuna Sandwich					
	<b>Lunch</b>					
	*Steamed Rice					
	*Pork Estofado                      *Chinese Pork Adobo					
	*Chicken Fingers                      *Bicol Express					
	*Chopsuey                      *Veggies					
	*Fried Chicken                      *Buttered Chicken					
	*Chinese Spicy Spareribs					
	*Seafood Kare-kare    *Chicken Katsudon					
	<b>Drinks</b>					
	*Soda                                      *Mango Juice					
	*Cucumber Lemonade    *Ice Tea					
	*Dalandan Juice                      *Pineapple Juice					
	<b>Hotel Accommodation</b>					
	Room Accommodation 2 rooms for 2 Guest Speakers			2		
	<b>Dinner for Guest Speakers and Representative from the BAC (Good for 5 persons)</b>			5		
					<b>Grand Total</b>	
Amount in words:						

After having carefully read and accepted your General Conditions, I/We quote you on the item at prices noted above.

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**Printed Name/ Signature**

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**Name of Establishment/Dealer**

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**Tel. No. / Cellphone No./ E-mail address**

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**Address**