



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



**BIDS AND AWARDS COMMITTEE OFFICE**

Date: JUL 10 2024  
Quotation No. QN-0408

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 JUL 15 2024 08:00 a.m.

  
**LORIE BELLE O. USISON**  
BAC Chairperson

**REMINDERS:**

1. Delivery period within 30 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: Supply and Delivery of Office Supplies, Janitorial Supplies and Computer Inks for the Use of RCCPC Various Program Implementation with an ABC of One Hundred Twenty-six Thousand Three Hundred Eighty-five Pesos and 97/100 (PHP 126,385.97)

ITEM NO.	ITEM & DESCRIPTION	BRAND	UOM	QTY.	UNIT PRICE	TOTAL PRICE
	<b>OFFICE SUPPLIES</b>					
1	Ballpen (Black) with Push Button		Pcs	49		
2	Bond Paper A4 (sub20) size 500 sheets		Reams	85		
3	Bond Paper Long Sub 20 (8.5" by 13") 500 sheets		Reams	80		
4	Bond Paper Short Sub 20 (8.5" by 11") 500 sheets		Reams	50		
5	Folder Long White		Pcs	50		
6	Folder Short White		Pcs	47		
7	Sign Pen Black Ink 1.0mm Needle Tip		Pcs	10		
8	Staple Wire #35 Standard 5000's/box		Bxs	10		
9	Sticky Notes Asstd. (Page Markers)		Pads	25		
	<b>JANITORIAL SUPPLIES</b>					
10	Air Freshener		Btls	5		
11	Alcohol, Ethyl 70% 1L		Btls	3		
12	Dishwashing Liquid 250ml/bottle		Btls	5		
13	Hand Towel (Rectangular size) 14" x 5" min.		Pc	12		
14	Toilet Tissue Paper 2-Plys Sheets		Pcs	25		
	<b>COMPUTER PRINTER INK / PRINTER RIBBON</b>					
15	Original Printer Ink Refill in 70ml Plastic Bottle Compatible for Epson Printer - BLACK		Btls	13		
16	Printer Epson L3110 Ink Refill BLACK 003		Pcs	13		
17	Printer Epson L3110 Ink Refill CYAN 003		Pcs	6		
18	Printer Epson L3110 Ink Refill YELLOW 003		Pcs	6		
19	Printer Epson L3110 Ink Refill MAGENTA 003		Pcs	6		
					<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.

\_\_\_\_\_  
Printed Name/ Signature

\_\_\_\_\_  
Name of Establishment/Dealer

\_\_\_\_\_  
Tel. No. / Cellphone No./ E-mail address

\_\_\_\_\_  
Address