



Republic of the Philippines
 Province of Antique
PROVINCIAL BIDS AND AWARDS COMMITTEE
 San Jose de Buenavista

**NEGOTIATED PROCUREMENT
 (SMALL VALUE PROCUREMENT)**

Standard Form No. SF-GOOD-60
 Revised on May 24, 2004

Date: April 21, 2022
 RFQ No. N-2022-04-029

Various Suppliers/Contractors
 San Jose, Antique/Iloilo City

Please quote your lowest price on the item/s listed below, subject to the General Conditions stated herein the shortest time of delivery and submit your quotation duly signed by your representative not later than **April 28, 2022** at the BAC Conference Room, 2nd Floor, Gov. Enrique A. Zaldivar Memorial Bldg., San Jose, Antique at 2: 00 o' clock p.m. in the return envelope attached herewith.

ATTY. NERY G. DUREMDES
 Provincial Administrator/BAC Chairman
 (Procurement Officer)

ITEM NO	QTY	UNIT	DESCRIPTION	UNIT COST	TOTAL ABC/UNIT	BRAND OFFERED	BID PRICE/UNIT	TOTAL BID PRICE
1	150	bundle	Foldkote paper #12 1000pcs/bundle	2,799.05	419,857.50			
			GRAND TOTAL ABC		419,857.50			
			<i>For the use of PDRRMO</i>					

TOTAL AMOUNT IN WORDS: _____ **GRAND TOTAL BID** P _____

TERMS/CONDITIONS AND REQUIREMENTS:

1. WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPPLIES AND MATERIALS, ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY THE PROCURING ENTITY
2. MAYOR'S PERMIT.
3. PhilGEPS REGISTRATION CERTIFICATE SHALL BE ATTACHED UPON SUBMISSION OF THE QUOTATION.
4. BIDDERS SHALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATION OF THE PRODUCT BEING OFFERED
5. BRAND NAME SHOULD BE REFLECTED IN THE BID OFFERED, IN CASE NOT AVAILABLE THE MANUFACTURER'S NAME SHOULD BE STATED.
6. BRING SAMPLE ONCE REQUIRED DURING POST QUALIFICATION/EVALUATION.

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

Place of Inspection: PGSO, San Jose, Antique
 Place of Delivery: G.O., San Jose, Antique (to be delivered by the winning supplier)
 Delivery Period: w/in 7 calendar days upon receipt of Purchase Order (P.O.)

 Printed Name/Signature

 Company's Name

 Tel. No./Cellphone/E-mail Add.

 Date