

Republic of the Philippines Province of Pampanga

Bids and Awards Committee

Provincial Capitol, City of San Fernando, (P) / (045) 435-5901

APR 1 5 2024

RFQ No. 240370

P.R. No. / Date / End User / Purpose:

(24-1484 4/1/2024 Governor's Office Packed Meals for Alagang Nanay Preventive Health Care Program for 3 months)

REQUEST FOR QUOTATION Small Value Procurement Company Name: Address: Tel. No.:

Please quote your lowest price for the requirements listed hereunder subject to the Terms and Conditions stated below and submit to this Office duly signed by you or your representative not later than 2:00 a.m. APR 1 9 2024

APPROVED BUDGET FOR THE CONTRACT (ABC):

PhP 966,000.00

FRANKIS V. MASLOG MAIRRERGON Pens

Bids and Awards Cor nmittee

TERMS AND CONDITIONS

- · All quotations may be typewritten or handwritten, placed in a sealed envelope.
- All quotations shall be valid for one hundred twenty (120) calendar days from the deadline of the submission
- · Any erasures or overwriting shall be valid only if they are signed or initialed by the supplier or its authorized representative.
- · Interested suppliers are required to submit their valid current Mayor's Permit, PhilGEPS Registration Number, and Income/BIR Tax Return (for ABCs above P500,000.00) upon submission of quotation. In lieu of the Mayor's Permit and PhilGEPS Registration Number, the PhilGEPS Certificate of Platinum Membership may be submitted. For new businesses, submit the BIR Certificate of Registration and latest quarterly return or percentage tax..
- · The applicable rate for late deliveries is one tenth (1/10) of one percent (1%) of the cost of the unperformed portion for everyday of delay.
- The Provincial Government of Pampanga reserves the right to accept or reject any quotation, and to annul the procurement process and reject all quotations at any time prior to contract award, without thereby incurring any liability to the affected supplier/s.
- · The PGP also reserves the right to waive any required formality in the proposals received, and select the proposal which it determine to be the most advantageous to the government.

Item No.	Qty	Unit	<u>Item Description</u>	Unit Price	Total Price
			LOT 1 - P488,000.00		
1	400	pax	1 pc Honey Bourbon Ribs, 1 scoop of steamed rice, 1 pc cornbread muffin, 1 side dish (coleslaw, fresh fruit, macaroni salad), iced tea in disposable glass 16 oz.		
2	400	рах	1 pc Roasted Chicken , 1 scoop of steamed rice, 1 pc cornbread muffin, 1 side dish (coleslaw, fresh fruit, macaroni salad)), iced tea in disposable glass 16 oz.		
3	400	pax	1/3 lbs Cheese burger with lettuce & tomato, chips , iced tea in disposable glass 16 oz.		

Item No.	Qty	Unit	<u>Item Description</u>	Unit Price	Total Price
			LOT 2 - P360,000.00	100 100 100 100 100 100 100 100 100 100	
4	400	pax	Quarter Size fried chicken, fresh lumpia, rice, caramel bar, iced tea in disposable glass 12 oz.		
5	400	pax	Quarter Size fried chicken, pancit canton , rice, caramel bar, iced tea in disposable glass 12 oz.	3330-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-	
			LOT 3 - P118,000.00		
6	400	pax	1 pc Fried Chicken with rice, 1 slice handtossed pizza, 1 bottled water 500ml		
7	400	рах	1 pc Fried Chicken with rice, 2 pc fried potatoes, 1 slice handtossed pizza, 1 bottled water 500ml	odkomenne se s su pour blever na na binastic com man	
			TERMS OF REFERENCE: 1. With food service facility in the locality to assure delivery of orders. 2. Must be packed in biodegradable pakaging with disposable spoon and fork. 3. Supplier may quote per lot or all of the lots.		
			AFTER SALES REQUIREMENT: 1. Delivered spoiled and soiled meals must be replaced within 1 hour		
			SCHEDULE OF REQUIREMENTS: Progressive Delivery and Billing Subject to at least 24 hours notification by the end-user.		
	A. D. Santas		Total Lot Price		
Note:	The w	inning	supplier shall submit a duly signed and notarized Omnibus Sworn St	atement prior to	notice of award.

THE BIDS AWARDS COMMITTEE:

Having carefully read and accepted your Terms and Conditions, including the technical specifications, I/We offer to supply/deliver the item/s as noted above.

Supplier's authorized representative signature over printed	BAC CANVASSER		
name			
Designation:			
Contact No.:	May		
Email Address.:			

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