Republic of the Philippines
KAGAWARAN NG PANLIPUNAN KAGALINGAN AT PAGPAPAUNLAD
Department of Social Welfare and Development
Field Office No. X
Cagayan de Oro City

## **CANVASS FORM**

	PR No Canvass No				
To (Supplier):	Date:				
Address:					
Tax Identification Number (TIN):					
Tel. No					
May we request you to prices for the items listed be	elow? Please return this form to the				
canvasser in sealed envelope or submit it to the Bi	ds and Awards Committee of the				
DSWD-X, Upper Carmen, CDOC on or before	9 AM (time)September 11, 2020(date)				
mmediately after the deadline of submission	canvass will be opened.				
•	•				

tem No.	Description	Qty	Unit	Unit Price	Total Price
	Beef ribs	25	kls		
	pork adobo	35	kls		
	ground pork	25	kls		
	ground beef-lean meat	10	kls		
	Beef lean meat	40	kls		
	Pork bones	40	kls		
	pork/meachdo/menudo/Liempo	40	kls		
	pork lean meat	40	kls		
	pork ribs	40	kls		
	pork chop	40	kls		
	Beef steak	30	kls		
	Chorizo	25	kls		
	longganiza	25	kls		
	hotdog	30	kls		
	Embotido	20	kls		
	Sweet ham	10	kls		
	Tempora	10	kls		
	Tocino	15	kls		
	Beef Patties	15	kls		
	Beef Tapa	20	kls		
	Lumpia shanghai	15	kls		
	Chicken thighs	40	kls		
	Chicken wings	40	kls		
	Chicken breast	40	kls		
	Chicken liver	10	kls		
	Drumstick chicken	40	kls		
	Whole chicken	40	kls		
	xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	xxxxxxxxxxxx	xxxxxxxxxx	xx   	
	AMOUNT	•	-		
	Budget: PHP				
de of Pa	ayment: PERIOD: Calendar days upon receipt/conforme				

TOT	AL AMOUNT					
Approve	d Budget: PHP					
Mode of	Payment:					
DELIVE	RY PERIOD: Calendar days upon receipt	conforme o	f approved P.O.			
Note:	<ol> <li>Quotations must be valid for 15 days</li> <li>Prices quoted must include taxes and of the second second</li></ol>		•	Not to include On per package	basis	
Canvass Submitted by:				Approved by:		
Signature Over Printed Name Owner/Manager				MARI-FLOR A. DOLLAGA-LIBANG Regional Director		
	date received:date received:					