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

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CANVASS FORM

PR No._____
Canvass No. _____
Date: _____

To (Supplier): _____
Address: _____
Tax Identification Number (TIN): _____ ☐ VAT ☐ NON VAT ☐ EXEMPT
Tel. No. _____

May we request you to prices for the items listed below? Please return this form to the canvasser in sealed envelope or submit it to the Bids and Awards Committee of the DSWD-X, Upper Carmen, CDOC on or before _____9 AM_____ (time) ___Sept. 10, 2021___(date) immediately after the deadline of submission canvass will be opened.

Item No.	Description	Qty	Unit	Unit Price	Total Price
	Complete Aircon Servicing and Cleaning (for the month of Sept.)		**job**		
	Heavy-PMS (for the month of Nov.)		**job**		
	Pull out and installation of transmission and replace of parts (for the month of November)		**job**		
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