



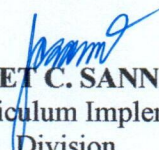
Republic of the Philippines  
**Department of Education**  
 Cordillera Administrative Region  
**SCHOOLS DIVISION OF BAGUIO CITY**

**REQUEST FOR QUOTATION**

Standard Form No.: SF-GOOD-60  
 Revised on: May 24, 2004  
 Standard Form Title: Request for Quotation

Supplier: Requesting Unit: SGOD/D. Tolentino  
 Address: PR No.: 2021-11-248  
 Telephone No.: Quotation No.: 2021-11-228  
 e-Mail: Date: November 15, 2021  
 Date received by the Supplier: ABC: 14,420.00

Please quote your lowest price on the item/s listed, subject to the General Conditions below, stating the shortest time of delivery and **submit your quotation in a sealed envelope** duly signed by your representative not later than November 19, 2021 2pm

  
**JULIET C. SANNAD**  
 Chief- Curriculum Implementation  
 Division  
 Chairman, Bids and Awards Committee

**REQUIREMENTS:**

1. Mayor's / Business permit
2. PhilGEPS registration number or certificate
3. Omnibus Sworn Statement

**Note:**

- ✓ Submit RFQ together with the requirements.
- ✓ All entries must be typewritten or legibly written.
- ✓ Delivery period within \_\_\_\_\_ Calendar Days.
- ✓ Price validity shall be for a period of 30 Calendar Days.

Item No.	Qty.	Unit	Item Description	Unit Price	Total Price
1	9	Gallons	Alcohol, 70% isoprophyl		
2	100	Packs	KF95 face masks, 10pcs per pack		
				<b>TOTAL</b>	
Purpose: Procurement of hygiene kits for the implementation of BPLP					



"DepEd SDO Baguio City: We Serve, We Care."

Address: 82 Military Cut-off Road, Baguio City  
 Telephone/Fax: 074-442-4326 / 074-442-7819 | Email: depedbaguio@depd.gov.ph  
 Website: www.depedpines.com | Facebook Page: facebook.com/DepEdTayoBaguioCity



ISO 9001:2015 Certified  
 Quality Management System  
 CRN RU-19.2560.026  
 Issued on 12/27/2019





**Republic of the Philippines**  
**Department of Education**  
 Cordillera Administrative Region  
**SCHOOLS DIVISION OF BAGUIO CITY**

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

\_\_\_\_\_  
 Signature over Printed Name

\_\_\_\_\_  
 Tin

\_\_\_\_\_  
 Date/Telephone No.

Canvassed by:

Item No.	Qty.	Unit Price	Total Price
1	9	Options Alcohol 70% (per pack)	
2	100	Packs 4193 face mask 1/pcr per pack	



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