



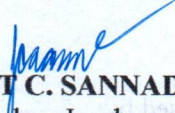
Republic of the Philippines  
**Department of Education**  
 Cordillera Administrative Region  
**SCHOOLS DIVISION OF BAGUIO CITY**

**REQUEST FOR QUOTATION**

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

Supplier: Requesting Unit: SGOD/N. Tibangay  
 Address: PR No.: 2022-05-089  
 Telephone No.: Quotation No.: 2022-05-081  
 e-Mail: Date: May 23, 2022  
 Date received by the Supplier: ABC: 47,252.65

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 May 27, 2022 29am

  
**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	8,763	Pieces	Surgical mask 3 ply		
2	74	Gallons	Alcohol isopropyl, alcohol, 68-72% scented 3.785 liters		
				<b>TOTAL</b>	
Purpose: Procurement of supplies and materials for SBFP school recipients for program operational use					



"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: depedbaguioicity@gmail.com  
 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.	Unit	Description	Unit Price	Total Price
1	Pieces	Surgical mask 3 ply	8.783	
2	Gallons	Alcohol prepolymer 68-72% surgical	3.783	
<b>TOTAL</b>				



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