



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

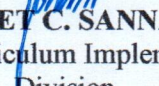
**REQUEST FOR QUOTATION**

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

Supplier:  
 Address:  
 Telephone No.:  
 e-Mail:  
 Date received by the Supplier:

Requesting Unit: SGOD/N. Tibangay  
 PR No.: 2022-10-235  
 Quotation No: 2022-10-226  
 Date: October 28, 2022  
 ABC: 5,280.00

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 4, 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	48	Pax	Day 1 AM Snack Pancit bihon with rice cake Bottled water		
2	48	Pax	Day 2 AM Snack Spaghetti with toasted garlic bread Bottled water		
			*Note: Individually packed in a disposable box with disposable utensils		
				<b>TOTAL</b>	

Purpose: Procurement of snacks during the conduct of ok sa DepEd one health week celebration on October 31, 2022 and November 4, 2022



"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



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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:

\_\_\_\_\_  
 Division  
 Chairman, Bids and Awards Committee

Item No.	Qty	Unit	Description	Unit Price	Total Price
1	48	Box	Day 1 AM Snack Lunch portion with rice, soup Bottled water		
2	48	Box	Day 2 AM Snack Breakfast with toasted garlic bread Bottled water		
*Note: Individually packed and disposable box with disposable utensils.					
TOTAL					



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