



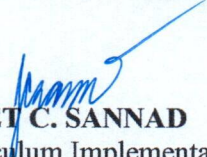
Republic of the Philippines
Department of Education
 Cordillera Administrative Region
SCHOOLS DIVISION OF BAGUIO CITY

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.: 2022-11-283
 Telephone No.: Quotation No.: 2022-12-285
 e-Mail: Date: December 6, 2022
 Date received by the Supplier: ABC: 135,472.50

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 December 12, 2022 @ 9am


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.

POSTED IN PHILGEPS

Item No.	Qty.	Unit	Item Description	Unit Price	Total Price
1	2	Boxes	Syringes, 5 cc (50pcs)		
2	2	Boxes	Syringes, 1 cc (20pcs)		
3	1	Unit	Nebulizer, heavy duty compressor		
4	10	Boxes	Face mask, adult		
5	1	Unit	BP Apparatus, digital		
6	2	Units	BP Apparatus, manual		
7	4	Pieces	Surgical scissors		
8	30	Pieces	Medical Jars		
9	4	Pieces	Torniquet		
10	4	Pieces	Forceps		
11	4	Packs	Disposable glass (plastic)		
12	2	Units	Aerosol suction, 3-filters, air pressure: 3-22.5Kpa		
13	10	Packs	Paper tissue towel		



"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



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 CRN RU-19.2560.026
 Issued on 12/27/2019



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14	4	Bottles	Liquid hand wash 250ml		
15	2	Gallons	Cidex		
16	1	Unit	Autoclave		
				TOTAL	
Purpose: Procurement of dental and medical equipment for medical and dental use					

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	Description	Unit Price	Total Price
1	2	Boxes	Bursters 7 in (20 post)		
2	2	Boxes	Bursters 1 in (20 post)		
3	1	Unit	Refrigerator heavy duty compressor		
4	10	Boxes	Face mask adult		
5	1	Unit	HP Apparatus digital		
6	2	Units	BP Apparatus manual		
7	4	Pieces	Surgical scissors		
8	30	Pieces	Medical jars		
9	4	Pieces	Tomopliers		
10	4	Pieces	Forceps		
11	4	Pieces	Disposable gloves (sterile)		
12	3	Units	Stethoscope		
13	10	Pieces	Laber tissue towel		



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