

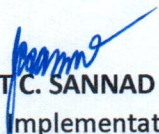


Republic of the Philippines
Department of Education
 Cordillera Administrative Region
SCHOOLS DIVISION OF BAGUIO CITY
REQUEST FOR QUOTATION

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

Supplier: Requesting Unit: SGOD/R. Sinot
 Address: PR No.: 2023-05-115
 Telephone No.: Quotation No.: 2023-05-113
 e-Mail: Date: May 30, 2023
 Date received by the Supplier: ABC: 54,000.00

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 June 7, 2023 @ 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 if above 50,000.00

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.

REGISTERED IN PHILGEPS

Item No.	Qty.	Unit	Item Description	Unit Price	Total Price
1	10	Boxes	Co-amoxiclav 625mg tablet/ 100's/ box		
2	50	Packs	Azithromycin 500mg 3tab/pk		
3	10	Boxes	Cetirizine HCl 10 mg tablet/ 100's		
4	5	Boxes	Metformin HCL 500mg tablet/100's		
5	5	Boxes	Cefalexin 500mg capsule / 100's		
6	10	Boxes	Diclofenac sodium 100mg capsule/100's		
7	5	Boxes	Ciprofloxacin 500 mg tablet/ 100's		
8	10	Boxes	Carbocisteine 500mg capsule/ 100's		
9	5	Boxes	Loratidine 10mg tabs/ 100's		
10	200	Tablets	Acetylcysteine 600 mg/tab		





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

11	10	Boxes	Amoxicillin 500mg tab/ 100's		
12	10	Boxes	Cloxacillin 100mg caps/ 100's		
13	100	Capsules	Omeprazole 40mg capsule		
14	10	Boxes	Loperamide 2mg tab/ 100's		
15	5	Boxes	Diphenhydramine 50 mg caps/ 100's		
16	1	Box	Metronidazole 500 mg tabs/ 100's		
17	5	Boxes	Paracetamol phenylpropanolamine HCl chlorphenamine maleate 325mg/25mg/2mg tablets		
18	1	Box	Cinnarazine 25mg tab/ 100's		
19	3	Boxes	Sinupret forte dragees / 100's		
				TOTAL	

Purpose: Procurement of medical supplies for the SDO employees

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:

