

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:OSDS/N. Ebanio	
Address:	PR No.:2024-08-204	
Telephone No.:	Quotation No.: 2024-08-182	
e-Mail:	Date: August 7, 2024	
Delivery Period: ABC: 120,000.00		
Date Received by the Supplier:		

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 _August 13, 2024 39am_____

Failure to submit this on or before the due date aforstated will be a ground for disqualification.

CARINEL F. MERIS

OIC-Assistant Schools Division Superintendent 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
- 4. Income/Business Tax Return 500,000.00 and above

POSTED IN PHILLEEPS

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	Qty.	Unit	Item Description	Unit Price	Total Price
No.					
			AM Snack: Mixed pancit with pandesal and bottled/canned juice		
1	240	Pax	Lunch: Picadillo, fried fish, pinakbet, rice, sinigang soup and banana (lakatan)		
			PM Snack: Baked bread (ham and bacon savory) and tetra juice 180ml		
			*Flowing brewed coffee, lemon grass tea and water *Assisted buffet at 2 stations		
			*Food to be served at designated tables for guest visitors and VIPs		
				TOTAL	

Purpose: Procurement of meals and snacks for the conduct of SDO Baguio City Foundation Anniversary on September 6, 2024



"DepEd SDO Baguio City:



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ices noted above.	our General Conditions, I/We quote you on the item at
	Signature over Printed Name
	Tin
	Date/Telephone No.

"DepEd SDO Baguio City: