



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:CID/J. Sannad
Address:	PR No.:2025-10-268
Telephone No.:	Quotation No.: 2025-10-267
e-Mail:	Date: November 3, 2025
Delivery Period:	ABC: 7,696.50
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 November 10, 2025 29am

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


CARMEL 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
5. PLEASE write the UNIT PRICE and TOTAL PRICE

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 Cost	Unit Price	Total Price
1	15	Pieces	Sign pen medium tip, black	55.50		
2	15	Pieces	Sign pen, medium tip, blue	55.50		
3	15	Pieces	Monthly scheduler notebook, A5 blank	191.50		
4	1	Piece	Stamp pad, felt	44.00		
5	1	Pack	Acetate film	475.00		
6	2	Boxes	Marker permanent, broad, black	440.00		



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7	2	Boxes	Marker, permanent, broad, blue	440.00		
8	2	Boxes	Marker, permanent, broad, red	440.00		
					TOTAL	

Purpose: Procurement of supplies for national assessment of NCAE, PEPT, QEALIS, NAT 12 A & E Test, NAT 6

After having carefully read and accepted your General Conditions, I/We quote you on the item at prices noted above.

Signature over Printed Name

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Date/Telephone No.

Canvassed by: