



Republic of the Philippines
Department of Education
Cordillera Administrative Region
SCHOOLS DIVISION OF BAGUIO CITY
JOAQUIN SMITH NATIONAL HIGH SCHOOL

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: JOAQUIN SMITH NHS
PR No.: **2026-05 JHS**
Quotation No.: **2026-05 JHS**
Date: **February 16, 2026**
ABC:Php **126,549.00**

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 **February 22, 2026**.


LORMA L. UGAY

Master Teacher III-Bids and Awards Committee Chairperson

REQUIREMENTS:

1. Mayor's / Business permit
2. PhilGEPS registration number or certificate
3. Income/Business Tax Return
4. Omnibus Sworn Statement

Note:

- ✓ Submit RFQ together with the requirements.
- ✓ All entries must be typewritten or legibly written.
- ✓ Delivery period within 07 Calendar Days.
- ✓ Price validity shall be for a period of 30 Calendar Days.

Item No.	Qty.	Unit	Item Description	Unit Price	Total Price
1	10	reams	PAPER, 120 gsm, 500s, Long		
2	25	reams	PAPER, 180 gsm, 100s, Short		
3	30	reams	PAPER, 90 gsm, 100s, A4, Pale Cream		
4	8	reams	PAPER, Graphing, 500s		
5	100	sheets	PAPER, MANILA		
6	358	reams	PAPER, Multipurpose A4		
7	195	reams	PAPER, Multipurpose LEGAL		
TOTAL					

Purpose: For School and Office 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

Telephone No./Contact Number

Canvassed by:


CHARIS S. MATA



Km. 4, Asin Road, Baguio City

Tel/ Fax: (074) 665-9989 OR 442-4319

Email: joaquinmithnhs@gmail.com or 305284@deped.gov.ph