



Republic of the Philippines
Department of Education
 Cordillera Administrative Region
 Schools Division of Baguio City
 ADIWANG Integrated School
 BALACBAC, STO. TOMAS PROPER, 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: Adiwang Integrated School
 Address: PR No.: 2026-04-013
 Telephone No.: Quotation No.: 2026-05-13
 e-Mail: Date: May 13, 2026
 Date received by the Supplier: ABC: P 116,810.00

Please quote your lowest price on the item/s listed, subject to the General Conditions below, stating the shortest delivery time and submit your quotation in a sealed envelope duly signed by your representative no later than **May 15, 2026, 5:00PM.**

EUGENE B. PATINGLAG

Chairperson, Bids and Awards Committee

REQUIREMENTS:

1. Mayor's / Business permit
2. PhilGEPS registration number or certificate

Note:

- / Submit RFQ together with the requirements.
- / All entries must be typewritten or legibly written.
- / Indicate brand and model of item offered.
- / Delivery period within _____ Calendar Days.
- / Price validity shall be for a period of 30 Calendar Days.

Item No.	Qty.	Unit	Item Description	Unit Price	Total Price
1	1	lot	CCTV		
	1	unit	32 channel NVR		
	12	unit	2MP Dome Network Camera Full Color w/ mic		
	3	pc	Cloud manage swith 4 port PoE		
	1	pc	Cloud manage swith 8 port PoE		
	1	pc	6TB surveillance HD		
	4	unit	Fiber Optic Media converter A/B 10x1000		
	4	pc	Outdoor Metal Box		
	12	pc	Dome Bracket		
	3	pc	3 gang outlet		
	1	box	HDMI 4K Reso 3meters		
	4	box	Fiber Patch Cord 3 meters		
	1	pc	UPS 600VA-360W		
	2	unit	Network cable cat-6 305 meters indoor		
	1	pc	6V Data Cabinet		
	500	meter	Meter fiber optic cable 1 core		
	1	unit	Installation materials		
	12	unit	Installation services		
	12	monthly	Monthly service warranty		
TOTAL			nothing follows		

Purpose: For classroom and computer room.

After carefully reading and accepting your General Conditions, I/We quote you on the item at the price noted above.

Convised by: _____

Signature over Printed Name

TIN

Date/Telephone Number



Adiwang Integrated School
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