



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.: 2026-04-014
 Telephone No.: Quotation No.: 2026-05-14
 e-Mail: Date: May 13, 2026
 Date received by the Supplier: ABC: P 160,400.00

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	12	unit	Router[BE3600 Dual-Band Wi-Fi 7 Router (BE220 Series)]		
2	2	unit	Office Laptop[Processor AMD Ryzen™ 5 7520U Mobile Processor (4-core/8-thread, 4MB cache, up to 4.3 GHz max boost) Windows 11 Home AMD Radeon™ Graphics 16GB LPDDR5 on board Storage 512GB M.2 NVMe™ PCIe® 3.0 SSD 15.6-inch]		
3	2	unit	Computer desktop(Microsoft Win 11 Home 64 Bit Eng Intl 1pk DSP OEI DVD Processor: Intel Core i5 12th Generation (or higher) with I GPU or AMD Ryzen 5 8th Generation (or higher) with iGPU Motherboard: Intel B660M Chipset, 4x DDR4 Slot or AMD B550 Chipset, 4x DDR4 Slot Memory: 16 GB DDR4 3200 MHz)		
			nothing follows		
TOTAL					

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.

Convassed by: _____

 Signature over Printed Name

 TIN

 Date/Telephone Number



Adiwang Integrated School
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