

Republic of the Philippines

Bepartment of Education

REGION X - NORTHERN MINDANAO SCHOOLS DIVISION OF EL SALVADOR CITY

| Name of Procuring Entity: | EL SALVADOR CITY DIVISION | | Purchase Request (PR) No.: | 2025-02-0005 | | |
|--|---------------------------|-----------|----------------------------|--------------|--|--|
| Revised on: | Dai | te: | Control No.: | 2025-02-0005 | | |
| Standard Form/Title: | REQUEST FOR QUOTATION | End-User: | El Salvador City Div | vision | | |
| Standard Form/ Title. | REGUEST FOR QUOTATION | End-Osci. | Di baivauoi City Di | 151011 | | |
| COMPANY NAME: | | | | | | |
| ADDRESS: | | | | | | |
| TEL NO./EMAIL: | TIN | N No.: | | | | |
| Please quote your lowest price for the package described below, subject to the Terms and Conditions stated below and submit your quotation duly signed by your representative not later than 9:00 A.M. of in the return envelope attached herewith. | | | | | | |
| TERMS and CONDITIONS: All entries must be typewritten or legibly written. | | | | | | |

Business Permit and PhilGEPS Registration Certificate shall be attached upon submission of the quotation. For the procurement of Medicines if the interested supplier is not the manufacturer, certification from the manufacturer that the supplier is an authorized distributor/ dealer of the products/items.

Bidders shall submit original brochures showing certifications of the package, if applicable

Agency may proceed with procurement upon receipt of three (3) quotation.

Free delivery.

| No. | ITEMS & DESCRIPTION | UNIT | QTY | UNIT COST | PRICE QUOTATION |
|---------------------------|--|-------|-----------------|-----------|-----------------|
| 1 | Meals (breakfast, lunch, and 2 snacks) | pax | 116 | 800.00 | |
| | | | | | |
| TOTAL ABC: Php. 92,800.00 | | TOTAL | QUOTATION: Php. | | |

^{*}refer to Technical Specifications for details (please see attached)

| After having carefully read and accepted your General Conditions, I | / We quote you on the item(s) at prices note ab | ove. |
|---|---|------|
|---|---|------|

| (Signature over Printed Name of the Proprietor | Date Signed |
|--|-------------|
| / Manager) | |

- After writing your bids/quotations, kindly write your name with your position and affix your signature in this RFQ.
- Prices that are incorrectly entered must be crossed out and initialed. The use of correction fluid or tape is discouraged.

Php.-1,505.00

- Kindly insert/enclose this accomplished RFQ in the given envelope. Seal and staple the envelope, then affix your signature across the envelope fold.
- Only sealed envelopes with signatures printed across the fold will be included/considered in the evaluation/opening of bids/RFQ.



Address: Zone 3, Poblacion, El Salvador City Telephone No: (088) 855-0113 Website: www.depedelsalvadorcity.net Email Address: elsalvador.city@deped.gov.ph

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CONNIEBEL C. NISTAL, Ph.D.

BAC Chairperson