



Department of Education
CORDILLERA ADMINISTRATIVE REGION
SCHOOLS DIVISION OF TABUK CITY
BCS Compound, Purok 2, Bulanao Norte, Tabuk City, Kalinga



REQUEST FOR QUOTATION

Suppliers Name: _____

DEADLINE OF SUBMISSION:

FEB 07 2023

RFQ No.: 23-21 Contact No.: 09560767069
MOP: SVP Contact Person: Welda Liezl Buslig

Sir/Madam:

Please quote at your government price (including VAT) and state the time and date which you can make delivery. It will be appreciated if we can have your quotation in the office as soon as possible on or before the deadline stated. Your quotations shall be subjected to the General conditions stated below.

1. Bidders shall provide correct and accurate information required in this form. All entries must be typewritten or in print and properly accomplished. Do not leave blank entries, put N/A for not applicable.
2. Price quotation/s to be denominated in Philippine Peso shall indicate all taxes, duties and/or levies payable.
3. Bidders must indicate BRAND and MODEL NUMBER for equipment and its accessories or peripherals. Evidence shall be in the form of manufacturer's un-amended sale literature, unconditional statement of specification and compliance issued by the manufacturer and sample.
4. Quotation through fax/email is acceptable. Winning bidder shall submit original signed RFQ before issuance of Purchase Order (P.O.).
5. Quotations exceeding the Approved Budget for Contract shall be rejected/disqualified.
6. Erasures/corrections made in the RFQ should be counter signed.
7. Documentary requirements shall be attached upon submission of the quotation. (See attached list of requirements per Mode of Procurement)

JAN NOWELLE PEÑA
BAC Chairperson

Item No.	Item and Description	Unit	Qty.	Unit Price	Total
1	AM Snack Day 1(empanada,camote fries and fresh fruit juice)	pax	20		
2	Lunch Day 1 (Beefsteak+Laing+sinigang na bangus w/ kangkong+rice+dessert)	Pax	20		
3	PM Snack Day1 (pancit bihon and fresh fruit)	Pax	20		
4	AM Snack Day2 (spaghetti and fresh fruit juice)	Pax	20		
5	AM Snack Day2 (spaghetti and fresh fruit juice)	pax	20		
6	Lunch Day2 (chiken adobo+pinakbet+soup+rice+dessert)	pax	20		
7	AM Snack Day 3(chicken macaroni salad and fresh fruit juice)	Pax	20		
8	Lunch Day 3(sinigang na baboy+daing nabangus+soup+rice+dessert)	pax	20		
9	PM Snack Dy 3 (hamburger and fresh fruit juice)	pax	20		
10	AM Snack Day 4 (tuna sandwich and fresh fruit juice)	pax	20		
11	Lunch Day 4 (fried chicken+chapseuy+soup+rice+dessert)	pax	20		
12	PM Snack Day 4 (bilobilo and fresh fruit juice)	pax	20		
13	AM Snack Day 5(empanada,camote friesand fresh fruit juice)	pax	20		
14	Lunch Day 5(beef steak+laing+sinigang na bangus with kangkong+rice+dessert)	pax	20		
15	PM Snack Day 5 (pancit bihon and fresh fruit juice)	pax	20		
16	AM Snack Day 6 (spaghetti and fresh fruit juice)	pax	20		
17	Lunch Day 6 (chicken adobo+pinakbet+soup+rice+dessert)	Pax	20		
18	PM Snack Day 6 (egg sandwich and fresh fruit juice)	Pax	20		
19	AM Snack day 7 (chicken macaroni salad and fresh fruit juice)	Pax	20		
20	Lunch Day 7 (sinigang na baboy+daing na bangus+soup+rice+dessert)	Pax	20		
21	PM Snack Day 7 (egg sandwich and fresh fruit juice)	Pax	20		

22	AM Snack day 8 (chicken macaroni salad and fresh fruit juice)	Pax	20		
23	AM Snack day 7 (chicken macaroni salad and fresh fruit juice)	Pax	20		
24	Lunch Day 7 (sinigang na baboy+daing na bangus+soup+rice+dessert)	pax	20		
Purpose	Meals and snack for the conduct of orentation-workshop on Project SOAR	ABC: 82,000.00		TOTAL:	

Terms & Conditions:

1. Delivery period within _____ calendar days.
2. Award of contract shall be made to the lowest quotation which complies with the technical specifications, and other terms and condition stated herein.
3. DepEd Tabuk City reserves the right to reject any or all offers as may be advantageous to the Office.
4. The award shall be by (by line item, by total bid price) _____.
5. Others: _____

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

Business/Company Name: _____

Printed Name & Signature of
Dealer/Authorized Rep.: _____

Business address: _____

Contact No.: _____

Email Address: _____