

Republic of the Philippines DEPARTMENT OF EDUCATION

Region XI

SCHOOLS DIVISION OF DIGOS CITY

Digos City



Date: ____

REQUEST FOR QUOTATION

Company Name	*		RFQ No.	24-01-008		
Address			Date: January 22, 2024			
Contáct No. TIN No.		Date and Tim	e of Opening	January 25, 2	024, 9:30 AM	
Please quo	te your lowest price on the item/s listed below, subject to the General Conditions,					
	ne of delivery and submit your quotation duly signed by your representative.	BEVERLY S. DAUGDAUG, EdD				
NOTE:		BAC CHAIRMAN For and in the absence of the BAC Chairperson:				
	UST BE LEGIBLY WRITTEN.		4			
2. DELIVERY PERIOD MUST BE ON FEBRUARY 2, 2024. 3. PRICE VALIDITY MUST BE WITHIN THIRTY (30) DAYS.		CLARENCE S. PILLERIN BAC VICE-CHAIRMAN				
	f: WITHIN 30 DAYS	BAC	VICE-CHAII	RMAN ()		
	S PER ITEM AND TOTAL AMOUNT					
	SUBMIT CERTIFIED PHOTOCOPY OF THE FOLLOWING					
REQUIRI	a) Mayor's/Business Permit					
	b) PhilGEPS Registration					
	c) Income/Business Tax Return					
	d) Omnibus Sworn Statement (ORIGINAL) e) Bank Account Number (Photocopy of any Proof of Bank Account)					
NOTE: F	or CY 2024, bidders shall submit these documents to DepEd Digos City Division only ONCE.					
7. Approved Budget	: <u>P 22,200.00</u>					
	(FAILURE TO DO SO WILL MEAN DISQUALIFICATION OF YO	OUR BID PROPO	SAL)			
ITEM NO.	ITEM & DESCRIPTION	UNIT	QTY.	UNIT PRICE	TOTAL PRICE	
Lot 1	Lease of Real Property and Venue, Meals and Snacks for the:	head	37			
	Re-orientation Workshop on Human Resource Functions of the Administr					
	Officer II and Administrative Assistants Deployed in the Schools on February	uary 2, 2024				
	Specifications:					
	Day 1 - February 2, 2024					
	AM Snacks: Clubhouse sandwich and canned juice Lunch: Steamed rice, buttered chicken, sweet and sour fish fillet, fruits, and ca	nned juice				
	PM Snacks: Empanada and canned juice	inied juice				
		-				
		-				
	SUBJECT TO WITHHOLDING TAX					
Canvassed by:		After naving o	I/We quote y		r General Conditions, at prices noted above.	
Date	-	-	Telephone/Cellphone Number			
		Printed 1	Name/Signatu	ure of Authorized	Representative	