

Republic of the Philippines

Department of Education

REGION IV- A CALABARZON CITY SCHOOLS DIVISION OF CITY OF TAYABAS

REQUEST FOR QUOTATION (RFQ)

HERBERT D. PEREZ

BAC Chairperson

	Date:	July 18, 2025
Name of Company	RFQ No.:	2025-07-105
	PR No.:	2025-07-0105
	ABC: P	41,300.00
Complete Company Address	PHILGEPS Ref. No.:	N/A

To Whom It May Concern:

Please quote your lowest price/s on the lot or item/s below, subject to General Conditions indicated herein, stating the shortest time of delivery and submit your quotation duly signed by your official representative not later than July 22, 2025 at 9:00 am to the address listed above.

GENERAL CONDITIONS

- All entries must be typewritten and legible;
- 2. Bidders must submit the following eligibility requirements:
 - a. PHILGEPS Registration Certificate
 - b. DTI or SEC
 - c. Mayor's/Business Permit
 - d. Income/Business Tax Clearance
- 3. Place this RFQ in a sealed envelope and type the following details on the face of the envelope:

Your Company Name RFQ No.: 2025-07-105 PR No.: 2025-07-0105 PHILGEPS Reference No.: N/A

- Delivery period must be at least within seven (7) calenday days upon receipt of the Notice of Award (indicated the days of delivery in the Bidder's Certicate)
- 5. Item/s delivered must have warranties for unit replacements, parts, labor or other services;
- 6. Price validity shall be for a period of three (3) months;
- 7. Quoted prices must be inclusive of taxes, and other charges or fees and shall not exceed the Approved Budget for the Contract
- 8. Transaction with City School Division of Tayabas shall mean compliance by the winning bidder with the bid and delivery
- 9. Failure to comply with these conditions shall mean disqualification of your bid proposal.

PLEASE QUOTE: PER LOT / PER ITEM			SUPPLIER/CONTRACTOR/CONSULTANT'S PROPOSAL BOX				
ITEM	ITEM DESCRIPTION	OTY.	UNIT	FINANCIAL			L PROPOSAL
NO.	(Item Name & Technical Specifications)	•		(Indicate the Price Offer)		(Indicate Brand/Model Offer)	
Request For Quotation for the Orientation of School Heads and Teachers on the Implementating Guidelines of the Academic Recovery and Accessible Learning (ARAL) Program (Activity Request#)			Unit Price	Total Price	Yes	No	
1	Snacks AM Champorado, Dilis, Puto, and Fresh Juice	59	pax				
2	Lunch Rice, Pork Hamunado, Fried Chicken, Chopsuey, Wanton Soup, Fruit Salad and fresh juice	59	pax				
3	Snacks PM Bibingka,Palabok, Juice in can	59	pax				
4	INCLUSION: *Session Room/s, tables and chairs with skirting, projector, sound system, microphones, unlimited coffee with sugar and creamer, chocolate drinks, fresh fruits for 2 pax (for top management), Buffer for 2 persons						
	TOTAL						
	Date of Event July 25, 2025						
				s for the Orientation of School Heads and Teachers on the ines of the Academic Recovery and Accessible Learning (ARAL)			







Address: Brgy. Potol, Tayabas City **Telephone No.:** (042) 785-9615

Email Address: tayabas.city@deped.gov.ph **Website:** https://www.sdotayabascity.ph

PLEASE QUOTE: PER LOT / PER ITEM				SUPPLIER/CONTRACTOR/CONSULTANT'S PROPOSAL BOX			
ITEM	ITEM DESCRIPTION	QTY.	Y. UNIT	FINANCIAL	PROPOSAL	TECHNICA	L PROPOSAL
NO.	(Item Name & Technical Specifications)			(Indicate the	Price Offer)	(Indicate Bran	nd/Model Offer)
Request For Quotation for the Orientation of School Heads and							
Teachers on the Implementating Guidelines of the Academic				Unit Price	Total Price	Yes	No
Recov	Recovery and Accessible Learning (ARAL) Program (Activity Request#)						

SUPPLIER/CONTRACTOR/CONSULTANTS CERTIFICATION

Atter having carefully read and accepted your General Conditions, I/We quote you on the item/s at price/s noted above for immediate delivery and shipment which can be made in _____ days from receipts of the Notice of Award.

aetwery and snipment wnich can be made in days from receipts of the Notice of Awara.							
CANVASSER'S CERTIFICATION							
This is to certify that I have full knowledge, authority and	Signature over Printed Name						
responsibility in distributing and/or collecting the Request for Quotation (RFQ) in accordance to the guidelines in securing prices for the City Schools	Company Tel./Fax/Mobile No.						
Division of Tayabas.	Company Tax Identification No. (TIN)						
Authorized Representative	Date						







Address: Brgy. Potol, Tayabas City **Telephone No.:** (042) 785-9615

Email Address: tayabas.city@deped.gov.ph **Website:** https://www.sdotayabascity.ph