



Republic of the Philippines
Department of Education
 REGION IV- A CALABARZON
 CITY SCHOOLS DIVISION OF CITY OF TAYABAS

REQUEST FOR QUOTATION (RFQ)

Name of Company	Date: February 03, 2026
	RFQ No.: 2026-02-009
	PR No.: 2026-02-0009
Complete Company Address	ABC: ₱ 49,000.00
	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 **February 12, 2026** at **9:00 am** to the address listed above.

HERBERT D. PEREZ
BAC Chairperson

GENERAL CONDITIONS

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

Your Company Name
RFQ No.: 2026-02-009
PR No.: 2026-02-0009
PHILGEPS Reference No.: N/A
- Delivery period must be at least within **7** calendar days upon receipt of the **Notice of Award** (indicated the days of delivery in the Bidder's Certificate)
- Item/s delivered must have **warranties** for unit replacements, parts, labor or other services;
- Price validity shall be for a period of three (3) months;
- Quoted prices must be inclusive of taxes, and other charges or fees and shall not exceed the Approved Budget for the Contract (ABC);
- Transaction with City School Division of Tayabas shall mean compliance by the winning bidder with the bid and delivery requirements
- 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 NO.	ITEM DESCRIPTION (Item Name & Technical Specifications)	QTY.	UNIT	FINANCIAL PROPOSAL (Indicate the Price Offer)		TECHNICAL PROPOSAL (Indicate Brand/Model Offer)		
				Unit Price	Total Price	Yes	No	Offered Brand/Model
Request For Quotation for the Procurement of Food for the Conduct of School-Based Feeding Program (SBFP) Implementation Review and Planning Workshop Programs								
1	Day 1 AM Snacks Spaghetti (Beef) Chicken Empanada Sago at Gulaman	70	pax					
2	Day 1 Lunch Rice Fried Chicken Vegetable Kare Kare Mango Sago	70	pax					
3	Day 1 PM Snacks Beef Cheeseburger with fries Four Season Juice in Can	70	pax					
4	Inclusions: Air-conditioned venue for plenary and workshop (70 pax capacity), sound system, LCD overhead projector, projector screen, movable tables for group workshop, with High-Speed Internet Connection, coffee table with coffee, sugar and creamer, water dispenser with supply of water, Buffer for 4 pax.							
TOTAL								
Date of Event				February 27, 2026				



Address: Brgy. Potol, Tayabas City
Telephone No.: (042) 785-9615
Email Address: tayabas.city@deped.gov.ph
Website: https://www.sdotayabascity.ph

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ITEM NO.	ITEM DESCRIPTION (Item Name & Technical Specifications)	QTY.	UNIT	FINANCIAL PROPOSAL (Indicate the Price Offer)		TECHNICAL PROPOSAL (Indicate Brand/Model Offer)		
Request For Quotation for the Procurement of Food for the Conduct of School-Based Feeding Program (SBFP) Implementation Review and Planning Workshop Programs				Unit Price	Total Price	Yes	No	Offered Brand/Model
Purpose		<i>Procurement of Food for the Conduct of School-Based Feeding Program (SBFP) Implementation Review and Planning Workshop Programs</i>						

SUPPLIER/CONTRACTOR/CONSULTANTS CERTIFICATION

After 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.

CANVASSER'S CERTIFICATION

This is to certify that I have full knowledge, authority and responsibility in distributing and/or collecting the Request for Quotation (RFQ) in accordance to the guidelines in securing prices for the City Schools Division of Tayabas.

Authorized Representative

Signature over Printed Name

Company Tel./Fax/Mobile No.

Company Tax Identification No. (TIN)

Date



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