



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: <u>April 20, 2026</u>
	RFQ No.: <u>2026-04-059</u>
	PR No.: <u>2026-04-0059</u>
Complete Company Address	ABC: <u>₱ 46,800.00</u>
	PHILGEPS Ref. No.: <u>N/A</u>

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 April 23, 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.: 2026-04-059
PR No.: 2026-04-0059
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 Supply and Delivery of Foods for the Review of QMS Implementation for SDO Personnel								
1	Batch 1 Day 1 AM Snacks tamis anghang pansit, 2 pcs kutsinta, fresh calamansi juice	39	pax					
2	Batch 1 Day 1 Lunch buffalo chicken wings, buttered mixed vegetables, fried fish, rice, fruit in season, lemon water	39	pax					
3	Batch 1 Day 1 PM Snacks creamy carbonara, puto and iced tea	39	pax					
4	Batch 1 Day 2 AM Snacks umpiang ubod sariwa and bottled water	39	pax					
5	Batch 1 Day 2 Lunch shanghai, chicken tinola, rice, coffee jelly, lemon water	39	pax					
6	Batch 1 Day 2 PM Snacks empanada and canned pineapple juice	39	pax					
7	Inclusions: buffer for 2 pax							
TOTAL								
Date of Event				APRIL 24 AND APRIL 27, 2026				
Purpose				Supply and Delivery of Foods for the Review of QMS Implementation for SDO Personnel				



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 NO.	ITEM DESCRIPTION <i>(Item Name & Technical Specifications)</i>	QTY.	UNIT	FINANCIAL PROPOSAL <i>(Indicate the Price Offer)</i>		TECHNICAL PROPOSAL <i>(Indicate Brand/Model Offer)</i>		
Request For Quotation for the Supply and Delivery of Foods for the Review of QMS Implementation for SDO Personnel				Unit Price	Total Price	Yes	No	Offered Brand/Model

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
<p>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.</p> <p>_____</p> <p>Authorized Representative</p>

_____	Signature over Printed Name
_____	Company Tel./Fax/Mobile No.
_____	Company Tax Identification No. (TIN)
_____	Date



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