122348

Republic of the Philippines
Department of Education
REGION I
SCHOOLS DIVISION OF ILOCOS NORTE

REQUEST FOR QUOTATION

Date: November 4, 2020

To: _____ RFQ No.: 117

I. Please quote your lowest price inclusive of VAT on the item(s) listed below, subject to the Terms and Conditions of this RFQ. Submit or send your quotation(s), duly signed by you or your representative inside an envelope to the Bids and Awards Committee or its secretariat on or before November 9, 2020, 8:00am at DepED Schools Division of Ilocos Norte, Brgy. 7-B Giron St., Laoag City care of BAC Secretariat. Please write your business name and your contact number in your envelope. Quotation that exceeds the approved budget for the contract (ABC) per item/lot shall be rejected. Evaluation and awards shall be done on a per item/per lot basis. For more information please call us at Tel. No. (077)771-0960 care of BAC secretariat. Prospective suppliers shall be responsible to verify herein items from SDO Ilocos Norte care of BAC Secretariat at Tel. No. (077)771-0960.

JOYE D. MADALIPAY, EdD
BAC Chairperson

II. Particulars:

Item/ Lot No.	ITEM AND DESCRIPTION/ Technical Specifications	ABC	QTY	Unit	Brand and Model No.	Unit Price	TOTAL
1	Foot Bath		15	pc			
2	Disinfectant Solution (Bleach), 1 gallon		135	gal			
3	Alcohol, 1 gallon		120	gal			
4	Surgical Mask, 3 ply		15	box			
5	N95		50	pc			
	TOTAL ABC	139,190.00					

Checked:	ARTHUR M. LLAGUNO BAC Member	CAROLINE P. CALILI BAC Member	ROSALINDA P. SALMASAN BAC Member
Purpose:	MATERIALS IN ENSURING THE HEALTH PROTOCOLS AT THE SDOIN DURING THE COVID-19 PANDEMIC (3RD QUARTER)		
Delivery Date/Period of Delivery:		**15 calendar days upon receipt of PO**	

Price Validity: _____
Delivered to: **DepED Schools Division of Ilocos Norte**
This is to submit our price quotations as indicated above subject to the terms and conditions of

Supplier's Business Name:	**TIN No.:**	**PhilGEPS No.:**
_____		
Address:		
E-mail:	Tel/CP No.:	
Fax No.	Date:	

_____
Supplier's Authorize Representative Signature over Printed Name

Received by: _____

BAC117