



Republic of the Philippines  
 Department of Education  
 Region X – Northern Mindanao  
**DIVISION OF OZAMIZ CITY**  
 City of Ozamiz  
 IBJT Compound, Carangan, Ozamiz City  
 Telephone (088) 545-0988 Fax No. (088) 545-0990  
 Website: ozamiz.deped.gov.ph / Email: deped1miz@gmail.com



### REQUEST FOR QUOTATION

<b>Procuring</b>	DepED, Division of Ozamiz City	<b>RFQ No.:</b>	SEPT23-189
<b>Office/End-</b>	DRRM	<b>PR No.</b>	2023-09-189
<b>Purpose:</b>	To be used for School Level Contingency Plan Writeshop (cluster 1)	<b>Date:</b>	December 19, 2023

**TERMS and CONDITIONS:**

- All entries must be typewritten or legibly written.
- Delivery period is on **Year 2024**
- Avoid quoting if stocks are not available within the period stipulated.
- Warranty shall be for a minimum of three (3) months for supplies and materials from date of acceptance by the end-user.
- Price validity shall be for a period of sixty (60) calendar days.
- Bidders shall submit original brochures showing certifications of the product, if applicable.
- Failure to print name and/or signature of authorized representative shall disqualify the supplier from participating the bidding process.
- Failure to deliver within the stipulated delivery period shall subject the supplier to a penalty or liquidated damages of 1/10 1% per day of delay on items not delivered.

Please quote your lowest price on the item(s) listed below, subject to the Terms and Conditions stated above and submit your quotation duly signed by your representative not later than 2 days after the receipt of this document.

Very truly yours,

**DIONESIO L. LAVAGON, JR.**

ASDS/BAC Chair

<b>Company Name:</b>							
<b>Address:</b>							
<b>Telephone No./ Fax No.</b>							
Item No.	QTY	Unit	Items and Description	ABC	Bidder's Brand	Unit Price	Total Price
1	99	pax	Lunch (4 viands, rice, 1 dessert, 1 softdrinks); AM and PM Snacks; unli coffee/milo with Venue	890.00			
			*** Nothing Follows ***				
<b>TOTAL</b>				<b>88,110.00</b>			

After having carefully read and accepted your General Conditions, I / We quote you on the item(s) at prices noted above.

**Note:**

- Amount Below Php 50,000.00
  - \* please attach MAYOR'S BUSINESS PERMIT (photocopy only)
- Amount Above Php 50,000.00
  - \* please attach MAYOR'S BUSINESS PERMIT (photocopy only)
  - \* Omnibus Sworn Statement (photocopy only)
  - \* Latest Income Business Return (photocopy only)

\_\_\_\_\_  
 Signature Over Printed Name / Date