

Republic of the Philippines
 Department of Education
 Region X – Northern Mindanao
DIVISION OF OZAMIZ CITY
 IBJT Compound, Carangan, Ozamiz City
 Tel. No. (088) 545-0988; Fax No. (088) 545-0990



REQUEST FOR QUOTATION

Name of Procuring Entity : _____ Request for Quotation (P.R.No.) 2016111204
 Revised On : _____ Date: November 22, 2016
 Office/End-User : **OSDS - SUPPLY** Purpose : **for SDS Staff**
COMPANY NAME : _____
ADDRESS : _____
TEL. NO./FAX NO. : _____

TO ALL ELIGIBLE SUPPLIERS:

Please quote your lowest price inclusive of VAT on the items/s listed below, subject to Terms and Conditions of this RFQ, and submit your quotation duly signed by your representative at DepEd-Division Office, Ozamiz City Division, Carangan, Ozamiz City not later than 10:00 AM of January 9, 2017 in return envelope attached herewith

TERMS AND CONDITION :

1. All entries must be legibly written
2. Delivery period within Two (2) Calendar days after PO received
3. Warranty shall be for a minimum of three (3) months for supplies & materials
4. Price validity shall be for a perios of sixty (60) calendar days
5. PhilGEPS Registration Certificate shall be attached upon submission of the quotation
6. Bidders shall submit original brochures showing certifications of the product, if applicable


SUSAN EPIFANIA B. CARPIO
 BAC, Chairperson

Item No.	Name of Supplies/Materials/Services Etc.	Qty.	Unit	Bidders Brand	Unit Price	Total Price
1	Air Conditioner 2HP Inverter, Split type, Wall Mounted includes Installation labor and materials	1	unit			
	-nothing follows-					

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

 Printed Name/Signature/Date