Republic of the Philippines **DEPARTMENT OF EDUCATION** Region VII, Central Visayas **DIVISION OF BOHOL** City of Tagbilaran

REQUEST FOR QUOTATION

			RFQ NO.:	2021-03-012455				
			DATE:	03-10-2021				
Name of Company:								
Address:								
Business Permit No.	and and services of a							
TIN No.								

Please quote your best offer for the item described below, subject to the Terms and Conditions provided at the dorsal portion of this request for quotation.

Submit your quotation duly signed by you or your duly representative and copies of the following eligibility requirements not later than ______.

- 1. DTI/SEC Registration
- 2. Business Permit

Graphic a

- 3. Latest Annual Income Tax/EFPS
- 4. Certificate of PhilGEPS Registration
- 5. Other Supporting Documents

Sealed Quotations may be submitted or mailed at DepEd-Division Office, Division of Bohol, CPG Avenue, Tagbilaran City.

DR. DANILO G/ GUDELOSAO BAC Chairperson

After having carefully read and accepted the Terms and Conditions, I/we submit your quotation/s for the item/s as follows:

Item/Description	QTY	Unit	Approved	OFFER							
			Budget for the Contract	PRICE			Compliance with Technical Specifications (Please Check)		REMARKS		
,				QTY	Unit Price	Total Price	Yes	No			
Health Advocacy Materials for the School Health and Nutrition Section of DepEd Division of Bohol.						·					
Health Programs Logo (15" x 15" x 1.5mm)	6	pcs.	7,200.00								
X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-											
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Purpose: For use in School Health and Nutrition Section of DepEd Division of Bohol											

(Signature Over Printed Name)