

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

**REQUEST FOR QUOTATION**

RFQ NO.: 2020-11-012330  
 DATE: 11-26-20

Name of Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Business Permit No. \_\_\_\_\_  
 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
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.

  
**MARINA S. SALAMANCA**  
 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 Budget for the Contract	OFFER					REMARKS
				PRICE			Compliance with Technical Specifications (Please Check)		
				QTY	Unit Price	Total Price	Yes	No	
Nursing Service Medicines and Supplies for the 4th Quarter of 2020.									
One Touch Select Test Strip, 25pcs	box	11	11,880.00						
Glucosure Autocode Strips, 50pcs	box	4	7,600.00						
Manual Sphygmomanometer (Pedia)	set	16	19,200.00						
Disposable Surgical Mask, 50pcs	box	36	13,680.00						
Clean Gloves, Medium	box	26	15,600.00						
Clean Gloves, Large	box	8	4,800.00						
Povidone Iodine 10% Solution	gallon	33	36,300.00						
Dissecting Set (Secheron Minor Kit 16 pcs.)	set	5	8,250.00						
Amlodipine 10mg tablet-100 pcs/box	box	33	13,200.00						
Losartan 100mg tablet-100 pcs/box	box	33	16,500.00						
70% Isopropyl Alcohol, 500ml	gallon	33	28,050.00						
<b>TOTAL</b>			<b>175,060.00</b>						
X-X-X-X-X-X-X-X									

**Purpose:** For use in the 4th Quarter of 2020 of DepEd Bohol Medical Section.

\_\_\_\_\_  
 (Signature Over Printed Name)