

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

**REQUEST FOR QUOTATION**

RFQ NO.: 2023-02-0048  
 DATE: 02-27-2023

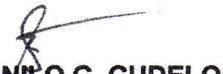
Name of Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Business Permit No. \_\_\_\_\_  
 TIN No. \_\_\_\_\_

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.

  
**DR. DANILO G. GUDELOS AO**  
 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	
<b>Procurement of Medical Supplies for the Sports and Athletics Training of Selected Athletes for the CVIRAA and Palarong Pambansa.</b>									
Aluminum Hydroxide, Magnesium Hydroxide 100 pcs/box	10	box	6,000.00						
Multivitamins syrup 120ml bottle	50	bottle	5,000.00						
Multivitamins capsule 100 caps/box	100	box	15,000.00						
Oral Rehydrating Solution powder, 25 sachets/box	10	box	3,500.00						
Zinc Oxide + Calamine ointment sachet/box	5	box	2,500.00						
Ice bag	14	pcs	1,400.00						
Hot water bag	15	pcs	1,500.00						
Mefenamic acid 500mg/capsule 100 caps/box	10	box	1,800.00						
Mefenamic acid 250mg/capsule 100 caps/box	10	box	1,700.00						