

Republic of the Philippines

Department of Education

REGION III **SCHOOLS DIVISION OFFICE OF BATAAN**

REQUEST FOR QUOTATION (RFQ)

The DepEd Schools Division of Bataan is accepting Quotation for the Procurement of Pasteurized Milk for the School Based Feeding Program-Milk Component Implementation for SY 2023-204 amounting to Six Million Seven Hundred Fifty-Seven Thousand Four Hundred **Sixty-Four** pesos (Php 6,757,464.00) only. Deadline for the submission of Quotation is on March 21, 2024

> SGD. ARMANDO C. CAPILI, EdD BAC Chairman



















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Region III
Schools Division Office of Bataan

Date	
RFQ No.	2024-

To all Eligible Suppliers:

I.	Please quote your lowest price inclusive of VAT on the item(s) listed below, subject to the Te or send your quotation(s), duly signed by you or your representative, inside a sealed enveloped to the temporal price of the price of the temporal	
	its Secretariat not later than at Schools Division Office of Bataan, Kabukiran, C	
	LORENA INLONG , BAC Secretariat Chairperson. Please write the Quotation No.	, your business name and
	contact no. in front of your envelope. Quotation that exceeds the approved budget for the co rejected. Evaluation and award shall be on a [per item/per lot] basis. For more information pl	
	care of LORENA INLONG, Records Officer. Prospective supplier shall be responsible to ve	
	INLONG, Records Office.	Λ.

ARMANDO C. CAPILI, EdD ASDS/BAC Chairperson

II. Particulars

Item / Lot No.	ITEM/DESCRIPTION / Technical Specifications Pasteurized Milk	Approved Budget for the Contract in PHP	QUANTITY & Unit of measure		Quotation Price	Total Price in Pesos
1			355656	pouch		
	(12264 bens x 29 days)					
	To be delivered in 12 Districts of SDO Bataan (weekly)					6
3						
	Re: School-Based Feeding Program- Milk Component Implementation for SY 2023-2024					

Delivery Period: 7 calendar days from Supplier's receipt of Purchase Order (PO).

Delivered to: [insert complete address of delivery]

This is to submit our price quotations as indicated above subject to the terms and conditions of this RFQ.

Supplier's Business Name:	TIN:			
Address:	Phone No.			
Telephone No.				
Supplier's Authorized Representative's Signature over Printed Name:	Date			















