



**REQUEST FOR QUOTATION (RFQ)**

SOLI NO. 2021-030

To: **ALL ELIGIBLE SUPPLIERS**

I Please quote your lowest price inclusive of VAT on the item(s) listed below, subject to the Terms and Conditions of this RFQ. Submit or send your quotation(s), duly signed by you or your representative, inside an I a sealed I envelope to the Bids and Awards Committee or its Secretariat on or before at DepED Div. Office, Balilahan, Mabua, Tandag City care of JASMIN R. LACUNA, BAC Chair. Please write the Quotation No. 132, your business name and contact no. in front of you envelope. Quotation that exceeds the approved budget for the contract (ABC), (Your item/per lot) shall be rejected. Evaluation and award shall be done on a (per item/per lot) basis. For more information please call us at Telephone No. : (086) 211-4375 care of ENGR. LEA G. GURIMBAO, BAC Secretariat.

**SHIRLENE E. CRABAJALES**  
 BAC Vice Chair

II Particulars

Item/ Lot No.	ITEM & DESCRIPTION / Technical Specifications	Approved Budget the Contract (ABC) in PhP	Quantity	Unit of measure	Brand and Model No.	Unit Cost
1	Paracetamol Syrup 250mg/5ml 60ml bot	35.00	200	bot		
2	Ambroxol Syrup 15mg/5ml 60ml bot	35.00	200	bot		
3	Cetirizine 5mg/5m 60ml syrup	55.00	200	bot		
4	Phenylephrine Syrup 60ml	35.00	200	bot		
5	Cefalexin Syrup 250mg/5ml, 60ml	70.00	50	bot		
6	Pyrethrin (licealiz) 60ml	100.00	400	bot		
7	Multivitamins Syrup 60ml	100.00	500	bot		
	For School Health & Nutrition Activities					

Delivery Period:

Delivered to: DepED Surigao del Sur Division - Balilahan, Mabua, Tandag City

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

Suppliers Business Name	Tin. No.
Address	
Telephone No.	Fax No.
Suppliers Authorized Representative's Signature over Printed Name	Date



Balilahan, Mabua, Tandag City, Surigao del Sur, 8300  
 (086) 211-3225  
 surigaodelsur.division@deped.gov.ph



ISO Cert. No. AW/PH909100102

