



**REQUEST FOR QUOTATION**

Project Title

**Provision of Dental Hygiene Supplies and Materials**

PR No.: 2023-11-247  
Date of PR: November 21, 2023  
End-User: Marilou D. Pandino  
Office: School Governance and Operations Division  
ABC: 43,200.00  
Place of Delivery: Mamburao, Occidental Mindoro

RFQ No.: 2023-11-247  
PhilGEPS Ref. No.: \_\_\_\_\_  
Closing Date: December 6, 2023  
Time: 9:00:00 AM  
Delivery Period: 7 day(s)

**Sir/Madam:**

**Please quote your total lowest price on the item(s) listed below**, subject to the General Conditions on the last page, stating the shortest time of delivery and submit your quotation duly signed by you/your representative not later than the set deadline at the BAC Secretariat, Department of Education-Division of Occidental Mindoro, Mamburao.

**RODEL S. MAGNAYE**  
BAC Chairperson

Item No.	Unit	Item Description (DepEd Specifications)	Supplier's Specifications (Write "Comply" if the offer is same with DepEd's specifications otherwise specify the offer)	Qty	Remarks
	pcs	Tooth paste 110 gms tube		160	
	pcs	Toothbrush (Adult)		160	
	pcs	Mouth wash 60 ml assorted flavor		160	
Total					

**NOTE:**

- 1 Please use permanent ink. All items must be typewritten or written legibly. In case of erasure or any alteration, should properly signed with initials of the signatory
- 2 Warranty shall be for a period of six (6) months for supplies and materials, one (1) year for equipment, from date of acceptance by the DepEd authorized signatory
- 3 Price validity shall be attached upon submission of the quotation
- 4 PhilGEPS Registration / certificate, Mayor's/Business Permit, Tax Registration, SEC or DTI shall be attached upon submission of quotation.
- 5 The winning bidder, after post qualification shall indicate the unit price per item in the Purchase Order and Sales Invoice.

**Sir:**

After having carefully read and accepted the General Conditions, I/We submit quotation on the item at prices specified above.

\_\_\_\_\_  
Name of Firm/Supplier/Contractor

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Authorized Representative

TIN: \_\_\_\_\_

Address: \_\_\_\_\_

Contact No.: \_\_\_\_\_

**NOTE:** It is understood that the price/s quoted herein is/are good for sixty (60) days as we have indicated herein. The DepEd reserves the right to reject any or all offers at no cost/s to the government, waive any therein and accept the offer most advantageous to the government. All items listed