



Republic of the Philippines  
Department of Education  
REGION XI  
SCHOOLS DIVISION OF DAVAO ORIENTAL

REQUEST FOR QUOTATION

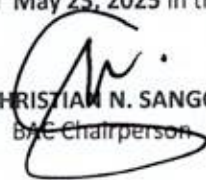
Company Name:

Date: May 09, 2025

Address:

Quotation No.: 2025-05-0017-2

Please quote your 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 your representative not later than **May 23, 2025** in the return envelope attached herewith.

  
CHRISTIAN N. SANGO  
BAC Chairperson

Note:

1. All entries must be typewritten.
2. Delivery period within \_\_\_\_\_ calendar days upon receipt of the Purchase Order.
3. Warranty shall be for a period of six (6) months for suppliers and materials, one (1) year for Equipment, from date of acceptance by the procuring entity.
4. Price validity shall be for a period of 45 calendar days.
5. PhilGEPS Registration Certificate shall be attached upon submission of the Quotation.
6. Bidders shall submit Original Brochures showing certificates of the product being offered.

Stock/ Property	Unit	Item Description	Qty	Unit Price	Total Cost (VAT Inclusive)
1	PC	<b>Lot 2</b> White cane (For mobility aid of the Blind) All Aluminum Foldable (3-4 folds) Black handle and red bottom 125cm long	1		
2	PC	Stylus (for writing of the blind) Plastic handled stylus with metal point 2 5/8 and 1 1/4 inches	1		
3	PC	Slate (for writing if the blind) blue color with 27 lines and 30 squares	1		
4	PC	Vestibular ball Pink therapy ball with soft and elastic surface diameter of 14-34 inches	1		
5	PC	Trampoline 4ft trampoline galvanized frame with a size of 1m Jump area of 1m Bed is woven permatron fabric	1		
6	PC	Abacus (For math calculation of the blind)  13-rod abacus with beads in white or orange color with frame measuring 6 1/8 x 3 1/4 inches	1		

Brand and Model: \_\_\_\_\_  
Delivery Period: \_\_\_\_\_  
Warranty: \_\_\_\_\_  
Price Validity: \_\_\_\_\_

After having carefully read and accepted your General Conditions, I/We quote you on the item at prices noted above.

\_\_\_\_\_  
Canvasser/s

\_\_\_\_\_  
Printed Name / Signature  
Bidder

Stock/ Property	Unit	Item Description	Qty	Unit Price	Total Cost (VAT Inclusive)

Purpose: **MEDICAL ASSESSMENT OF SPECIAL NEEDS EDUCATION (SNED) LEARNERS**

Activity Date:

ABC: **10,000.00**

Brand and Model: \_\_\_\_\_  
 Delivery Period: \_\_\_\_\_  
 Warranty: \_\_\_\_\_  
 Price Validity: \_\_\_\_\_

After having carefully read and accepted your General Conditions, I/We quote you on the item at prices noted above.

\_\_\_\_\_  
 Canvasser/s

\_\_\_\_\_  
 Printed Name / Signature  
**Bidder**