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

REQUEST FOR QUOTATION

Company Name: _____ Date: October 06, 2025

Address: _____ Quotation No.: 2025-10-0007-1

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 **October 10, 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)
		Lot 1			
1	bottle	Paracetamol 250mg/5ml Syrup Bottle	25		
2	box	Paracetamol 500mg tablet (100/box)	20		
		Technical Specifications: All the medicines and soaps should be manufactured April 2025 onwards. The drugstore/wholesaler/supplier should have a FDA License to Operate			
3	Tablet	Phenylephrine hydrochloride + Chlorphenamine maleate + Paracetamol	100		
4	tablet	Losartan Potassium 50mg	200		
5	Tablet	Amlodipine 5mg	100		
6	box	Multivitamins (Enervon) box (100 pcs)	10		
7	bottle	Amoxicillin-Clavulanic Acid 457/5 Syrup 70ml	20		
8	bottle	Amoxicillin-Clavulanic Acid 625mg tablet	30		
9	tablet	Clarithromycin 500mg/tab	30		
10	pcs	Clotrimazole 5grams cream	10		
11	box	Azithromycin 500mg/tab	10		
12	sachet	Calmoseptine 3.5g ointement	30		

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

Stock/ Property	Unit	Item Description	Qty	Unit Price	Total Cost (VAT Inclusive)
13	pcs	Salbutamol + Ipratropium Bromide 2.5mg/500mcg Nebule	30		
14	tablet	Domperidone 10mg tablets	15		
15	bottle	Cetirizine Syrup 5mg/5ml (60ml)	20		
16	pcs	Tobramycin + Dexamethasone 3mg/ml/1mg/ml	10		
17	pcs	Mupirocin 20mg/g Topical Ointment	10		
18	pcs	Silver Sulfadiazine 10mg/g	10		
19	tablet	Loperamide 2mg tablet	100		
20	sachet	ORS Sachet	50		
21	pcs	Hypromellose 0.3% Eye drop	10		
22	pcs	Tetrahydrozoline 0.05% Solution	10		
23	tablet	Doxycycline 100mg	50		
24	tablet	Norgesic Forte 50mg/650mg tablet	20		
25	tablet	Norgesic Forte 50mg/650mg tablet	100		
26	pcs	Guava Soap with moringa and tea tree 100grams	50		
27	pcs	Acapulco Soap 100gm	50		
28	pcs	Sulfur Soap 50grams	50		
29	pcs	Nebulizer Kit (Pedia)	3		
30	roll	Disposable Trash Plastic Bag XXL	20		
31	box	Food storage bags/containers zip lock 6x6 24pcs/box	10		
32	pcs	Soft Bristle Toothbrush for Kids	500		
33	pcs	Toothpaste Twin Pack 60g	500		
34	pcs	Small Nail Cutter	500		
35	bottle	70% Isopropyl Alcohol Spray 60ml	500		
36	pcs	Soft Durable Microfiber Towel 30x30cm	500		
37	pack	Sanitary Pad Napkins without wings 4 pads per pack	400		
38	pack	Transparent Zipper Bags with Strong Seal (Zip Lock) 14x20 cm (100pcs/box)	10		
39	pack	Toilet Tissue 4 rolls/pack	50		
40	pcs	Colored Plastic Comb Unisex Assorted Colors	200		
41	tablet	Ascorbic Acid 500mg	100		

Purpose: **PROVISION OF VITAMINS, BASIC MEDICINES, HYGIENE AND OFFICE SUPPLIES FOR SBFP OPERATIONS**

Activity Date: November 2025

ABC: **239,955.00**

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