REQUEST FOR QUOTATION

FOR: SLIPPLY AND DELIVERY OF LABORATORY REAGENTS FOR USE IN KPEP

	For: SUPPLY AND	DELIVI	ERY OF	LABURA	UKY KEAGE	NIS POR U	SE IIV NPPP		
					Date: Sept	ember 29,	2017		
	Name of Company				RFQ No.: gleyva-RFQ-G239-2017				
					PR No.: H-7	29-9-17			
	Complete Company Address				PHILGEPS R	ef. No.: 483	35027		
To w	yhom it may concern:					CANVASSERS'	CERTIFICATION	!	
deli	Please quote your lowest price/s on ect to General Conditions indicated herein, st very and submit your quotation duly signed by later than September 22, 2017 at 5:00 PM to the Very truly yours,	ating the your offic he <u>BAC O</u>	e shortes cial repre	t time of	authority a collecting th the guidelin	nd responsibi e Request for	that I have ful lity in distribu Quotation in a ag prices for <u>I</u> avite.	nting and/or ccordance to	
	BAC Chairman						above Signatum D CANVASSER	9)	
	PLEASE QUOTE: <u>PER IT</u> I	<u>EM</u>				BIDDER'S PRO	OPOSAL BOX		
No	ITEM DESCRIPTION (ITEM NAME&TECHNICALSPECIFICATIONS)	QTY.	UNIT	APPROVED BUDGET OF CONTRACT (ABC)	1	PROPOSAL Price Offer)	TECHNICAL PROPOSAL	Delivery weeks /days	
				7,007	Unit Price	Total Price			
1	Laboratory Reagent]		550,057.50	ļ				
	see page 2 for itemized description	<u> </u>	 	ļ					
	TOTAL		<u> </u>			<u> </u>	<u> </u>		
г	CONTRAL CONDITIONS								
,	GENERAL CONDITIONS 1. All parties must be treeswritten and legible:								
I	All entries must be typewritten and legible; Bidders must submit necessary business permits(SEC,LGU,DTI, CDA, BIR			CDA, BIR	SUPPLIER/CONTRACTOR/CONSULTANTS				
2-					<u>CERTIFICATION</u>				
,	Certificate, etc.); Place this RFQ in a sealed envelope and type to	he folio	wing deta	ils on the					
J.	 Place this RFQ in a sealed envelope and type the following details on the face of the envelope: 				Date:				
	Your Company Name				Date.				
	RFQ No.								
PR No.					After having carefully read and accepted				
PHILGEPS Reference No.					Your General Conditions, I/We quote you on the item/s				
4.				he	at price/s noted above for immediate delivery and				
	date of the Notice to Proceed (Indicate the days of delivery in the Bidder's Proposal box)				shipment which can be made in				
5.	the formation and a party lobor				days from receipt of the Notice To Proceed.				
]	or other services;								
Price validity shall be for a period of three(3) months;					_				
7. Quoted prices must be inclusive of taxes, and other charges or fees and				fees and	Print Name & Signature of				
	shall not exceed the Approved Budget for the Contract(ABC);				Authorized Representative				
8.	If Bid is accepted, the supplier undertakes to	provide a	a perified i	n the					
	security in the form, amounts, and within the times specified in the					C = 3	Far / Sabila 61		
9.	Revised IRR of R.A. 9184; 9. It is understood that the Provincial Government of Cavite is not bound to					company Tel.	/Fax/Mobile No	<i>?•</i>	
J.	accept the Lowest Calculated Bid or any Bid I			-					
10.). Transaction with the Provincial Government of Cavite shall mean				C	mpany Tax Ide	entification No.	(TIN)	
	compliance by the winning bidder with the bid and delivery requirements					grange comment	- '	-	
	before the issuance of check payment;				*Attach Ce	ertificate of Re	gistration (BIR)		
11.	Failure to comply with these conditions shall	mean di	squalifica	tion of					

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BIDDER'S PROPOSAL BOX PLEASE QUOTE: PER ITEM APPROVED Delivery ITEM DESCRIPTION **BUDGET OF** FINANCIAL PROPOSAL TECHNICAL Νo UNIT QTY. weeks (ITEM NAME&TECHNICALSPECIFICATIONS) CONTRACT (Indicate the Price Offer) **PROPOSAL** /days (ABC) Unit Price Total Price 2 1 Glucose Hexokinase FS Set 60,500.00 2 Cholesterol FS 3 Urea FS 2 Set 29,238.00 2 Set 72,600.00 4 Creatinine PAP FS
5 HDL Cholesterol FS 2 Set 135,520.00 Set 60,984.00 6 ASAT (GOT) FS 2 Set 18,634.00 7 ALAT (GPT) FS Set 18,634.00 8 Magnesium 9 Total Bilirubin Set 21,780.00 1 1 5,929.00 Set 10 Direct Bilirubin 1 Set 5,929.00 11 Alkaline Phosphatase 1 Set 6.352.00 12 Total Protein 1 Set 6,352.50 13 Albumin 1 Set 7,623.00 14 CKMB 1 Set 11,434.50 15 LDH (Lactate Dehydrogenase) 1 Set 8,385.00 16 Amylase Set 1 48,400.00 31,762.50 17 | Lipase 1 Set **nothing follows** TOTAL 550,057.50

Company Name.	
Address	
Print Name & Sianature of	

Authorized Representative