

REQUEST FOR QUOTATION



For: SUPPLY AND DELIVERY OF VARIOUS MEDICAL SUPPLIES FOR USE OF CCMH

Date: February 11, 2020

RFQ No.: nlontoc-RFQ-G003-2020

PR No.: 2020-2-H-38/02-05-2020

PHILGEPS Ref. No.: 6849819

Name of Company

Complete Company Address

To whom it may concern:

Please quote your lowest price/s on the lot or item/s below, subject to General Conditions indicated herein, stating the shortest time of delivery and submit your quotation duly signed by your official representative not later than **February 17, 2020 at 5:00 PM** to the **BAC Office**.

Very truly yours,
RENATA A. ABUTAN
BAC/A Chairman

PLEASE QUOTE: PER ITEM

CANVASSERS'S CERTIFICATION

This is to certify that I have full knowledge, authority and responsibility in distributing and/or collecting the Request for Quotation in accordance to the guidelines in securing prices for **Cavite Center for Mental Health** of the Provincial Government of Cavite.

(Printed Name above Signature)
AUTHORIZED CANVASSER

BIDDER'S PROPOSAL BOX

No	ITEM DESCRIPTION (ITEM NAME&TECHNICALSPECIFICATIONS)	QTY.	UNIT	APPROVED BUDGET OF CONTRACT (ABC)	FINANCIAL PROPOSAL (Indicate the Price Offer)		TECHNICAL PROPOSAL	Delivery weeks /days
					Unit Price	Total Price		
1	ALCOHOL ISOPHROPHYL 70% 500ML	20	BTL	2,000.00				
2	ANTISEPTIC SOL.10% POVIDONE GAL	2	GAL	3,600.00				
3	BLOOD GLUCOSE STRIP	6	SET	4,800.00				
4	BP APPARATUS AND STETHOSCOPE (ALPK JAPAN)	2	PCS	6,000.00				
5	COTTON 400 GRAMS	20	ROLL	3,600.00				
6	COTTON BUDS 200 TIPS/PACK	12	PACK	480.00				
	SEE PAGE TWO FOR SPECIFICATIONS							

GENERAL CONDITIONS

1. All entries must be typewritten and legible;
2. Bidders must submit necessary business permits(SEC,LGU,DTI, CDA, BIR Certificate, etc.);
3. Place this RFQ in a sealed envelope and type the following details on the face of the envelope:
 Your Company Name
 RFQ No.
 PR No.
 PHILGEPS Reference No.
4. Delivery period must be at least within _____ calendar days from date of the Notice to Proceed (Indicate the days of delivery in the Bidder's Proposal box)
5. Item/s delivered must have warranties for unit replacements, parts, labor or other services;
6. 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 shall not exceed the Approved Budget for the Contract(ABC);
8. If Bid is accepted, the supplier undertakes to provide a performance security in the form, amounts, and within the times specified in the Revised IRR of R.A. 9184;
9. It is understood that the Provincial Government of Cavite is not bound to accept the Lowest Calculated Bid or any Bid it may receive.
10. Transaction with the Provincial Government of Cavite shall mean compliance by the winning bidder with the bid and delivery requirements before the issuance of check payment;
11. Failure to comply with these conditions shall mean disqualification of your bid proposal

**SUPPLIER/CONTRACTOR/CONSULTANTS
CERTIFICATION**

Date: February 17, 2020

After having carefully read and accepted Your General Conditions, I/We quote you on the item/s at price/s noted above for immediate delivery and shipment which can be made in _____ days from receipt of the Notice To Proceed.

Print Name & Signature of
Authorized Representative

Company Tel./Fax/Mobile No.

Company Tax Identification No. (TIN)

***Attach Certificate of Registration (BIR)**

Handwritten initials

PLEASE QUOTE: PER ITEM

BIDDER'S PROPOSAL BOX

No	ITEM DESCRIPTION (ITEM NAME&TECHNICALSPECIFICATIONS)	QTY.	UNIT	APPROVED BUDGET OF CONTRACT (ABC)	FINANCIAL PROPOSAL (Indicate the Price Offer)		TECHNICAL PROPOSAL	Delivery weeks /days
					Unit Price	Total Price		
7	DENTAL ASPIRATING NEEDLE GUAGE 27 SHORT (100 PCS/BOX)	1	BOX	1,000.00				
8	DENTAL ASPIRATING GUAGE 27 LONG	1	BOX	1,000.00				
9	DENTAL ASPIRATING NEEDLE GUAGE 30 SHORT (100PCS/BOX)	1	BOX	1,000.00				
10	DENTAL ASPIRATING NEEDLE GUAGE 30 LONG	1	BOX	1,000.00				
11	DENTAL ANESTHETIC SOLUTION 1.8 ML HYDOCAINE 2% WEPHINEPRINE (50 PCS/BOX)	6	BOX	9,000.00				
12	DIGITAL THERMOMETER	6	PCS	660.00				
13	DISPOSABLE NEEDLE G-23X100'S TERUMO	10	BOXS	9,000.00				
14	DISPOSABLE SYRINGE 3CC W/ NEEDLE G-23 TERUMO/100'S	12	BXS	9,600.00				
15	FACE MASK 50'S	10	BXS	1,200.00				
16	GLOVES MEDIUM 100 PCS/BOX	6	BOX	1,860.00				
17	GLOVES LARGE 100 PCS/BOX	6	BOX	1,860.00				
18	HOT WATER BAG	6	PCS	720.00				
19	MICROPOR PLASTER 1 INCH X 12'S	20	PCS	1,000.00				
20	SURGICAL GAUZE SPONGES UNSTERILE 4X4X100'S/PACK	10	PACK	2,500.00				
21	SURGICAL GAUZE SPONGES STERILE 4X4X100'S/PACK	10	PACK	5,000.00				
	nothing follows							
	TOTAL			66,880.00				

Company Name.

Address

Print Name & Signature of Authorized Representative