



REQUEST FOR QUOTATION

Solicitation No. **RSU-40-19**

Quotation No. **19-05-066**

Date : May 27, 2019

Company Name: _____

Address : _____

Sir/Madame:

Please quote your lowest price on the Item/s below, subject to the General Conditions and Eligibility Requirements for the Suppliers, stating the shortest time of the delivery and submit your quotation duly signed by your representative not later than **May 30, 2019** at exactly 5:00 in the afternoon in the return envelope attached herewith.

Project: Procurement of Various Medical Supplies for Clinic

ABC: PhP64,500.00

QTY: 199

UNIT	ITEM DESCRIPTION	QTY	ESTIMATED UNIT COST	ESTIMATED COST
box	Acetylceisteine (Fluimucil) 600mg/tablet 10's	5		
box	Amlodipine 5mg/tablet 100's	10		
box	Amoxicillin 500 mg/capsule 100's	10		
box	Ascorbic Acid 500mg/tablet 100's	10		
box	Meclizine hcl (Bonamine) 25mg/tablet 200's	1		
box	Catapres 75mg/Tablet 50's	1		
box	Celecoxib 200mg/capsule 100's	3		
box	Cinnarizine 25mg/tablet 100's	3		
box	Cloxacillin 500 mg/capsule 100's	5		
box	Diphenhydramine 50mg/capsule 100's	10		
box	Gaviscon 500mg/267mg/160mg per 10ml Oral Suspension 24's	2		
box	Hyoscine 10 mg/tablet 100's	10		
box	Kremil-S 500mg/tablet 100's	10		
box	Roxithromycin 150mg/tablet 100's	3		
box	Salbutamol (as Sulfate) 1mg/ml (.5mg/2.5ml) Respiratory Solution 30'S	2		
box	Diphenhydramine 50mg/ml Solution for injection (I.M./I.V.) 10'S	3		
box	Tramadol HCL 50mg/ml solution for injection (I.M./I.V.) 10'S	1		
box	Hyoscine N-Butylbromide 20mg/ml solution for injection (I.M./I.V./S.C.) 10'S	3		
box	Ranitidine 25mg/ml (50mg/2ml) Sterile Solution for injection 10's	1		
box	Sambong 500mg/tablet 100's	2		
bottle	Omega Pain Kille 120ml	24		
box	Multivitamins + Iron 500mg/tab 100's	50		
box	Hydrocortisone 100mg/vial 10's	1		
box	Essentiale Forte 500mg/tab 100's	1		
box	Co-Amoxiclav 625mg/capsule 50's	2		
box	Cefuroxime 500mg/tab 100's	1		



box	Visine Eye Drops 5ml	10		
box	Omeprazole 20mg/tablet 100's	10		
box	Metoprolol 50mg/tablet 100's	5		
TOTAL		QTY	199	Estimated Cost

Yours,


MARIO A. FETALVER JR., Ph. D.
 BAC Chairperson

Canvassed by:

LARRY I. FIRMALO
 Procurement Officer

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BIDS & AWARDS COMMITTEE (BAC)
ROMBLON STATE UNIVERSITY
Odiongan, Romblon

Sir/Madame:

Delivery Period : _____
Warranty : _____
Price Validity : _____

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

 Printed Name / Signature

Tel. No. /Cellphone No. _____

Email Address _____

Date: _____

REQUEST FOR QUOTATION

Terms & Conditions:

1. All entries must be type/hand-written.
2. Delivery period within 15 calendar days.
3. Warranty shall be for a period of six (6) months for supplies and materials, one (1) year for equipment, from the date of acceptance by the procuring entity.
4. Price validity shall be for a period of three months.
5. PhilGEPS registration Certificate shall be attached upon submission of the quotation.
6. Bidder shall submit original brochures showing certifications of the production being offered.
7. Payment shall be made after the inspection.
8. Deliver items at Supply Office, Romblon State University, Odiongan, Romblon (042-567-5375)

CHECKLIST OF ELIGIBILITY REQUIREMENTS FOR THE BIDDERS/SUPPLIERS:

The Eligibility Envelope shall contain the following:

1. Mayor's/Business permit
2. PhilGEPS Registration Number
3. Income/Business Tax Return
4. Omnibus Sworn Statement

Note: Submitted documents must be properly authenticated.