



Republic of the Philippines
City of Tagbilaran
City Hall, Tagbilaran City, 6300 Bohol

REQUEST FOR QUOTATION Procurement of Goods [Medicines, Medical Supplies and Equipment]

The City Government of Tagbilaran, through the **Special Education Fund 2019**, intends to apply the sum of **Five Hundred Fifty One Thousand Nine Hundred Eleven Pesos and Thirty Five Centavos only (Php551,911.35)** being the Approved Budget for the Contract (ABC) to payments under the contract for **Quotation No. 1901-41**. Quotations from suppliers received in excess of the ABC shall be automatically rejected.

The City Government of Tagbilaran now invites suppliers to quote for **300 tablets Paracetamol 500mg; 100 tablets Loperamide 2mg; 20 tablets Dicycloverine 10mg and OTHERS** for the **Tagbilaran City Schools Division, Tagbilaran City**. Delivery of the Goods is required within **5 Calendar Days** after receipt of Purchase Order. Suppliers should have completed, within 24 months from the date of submission and receipt of quotations, a contract similar to the Project. The description of an eligible supplier is contained in the Bidding Documents, particularly, in Section 11, Instruction to Bidders.

Quotation for Goods will be conducted through open competitive procedures as specified in the Implementing Rules and Regulations (IRR) of Republic Act (RA) 9184, otherwise known as the "Government Procurement Reform Act".

Quotation for the Goods is open to all interested suppliers, whether local or foreign, subject to the conditions for eligibility provided in the IRR of RA 9184.

Interested suppliers may obtain further information from the City Government of Tagbilaran at the address given below during 8:00 AM - 5:00 PM Monday to Friday only except holidays.

A set of Request for Quotation be purchased by interested Suppliers on **January 30 – February 6, 2019** from the address below and upon payment of a non-refundable fee in the amount of **P150.00**.

Quotations must be delivered to the address below on or before **February 6, 2019 at 5:00 PM**.

Request for Quotations will be opened and the lowest quotation for the goods will be awarded the supply of the goods to be procured at the BAC Office, CEO, Tagbilaran City. Late quotations shall not be accepted.

The City Government of Tagbilaran reserves the right to accept or reject any quotations, to annul the awarding process and to reject all quotations at any time prior to contract award, without thereby incurring any liability to the affected suppliers.


CATHELYN O. TORREMOCHA
BAC Chairman

Company Name: _____
 Address : _____

REQUEST FOR QUOTATION

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 February 6, 2019 at 5:00 PM.



CATHELYN O. TORREMOCHA
 Procurement Officer

- NOTE: 1 ALL ENTRIES MUST BE TYPEWRITTEN IF POSSIBLE
 2 QUOTATIONS WITH ERASURES WILL BE DULY INITIALLED
 3 DELIVERY PERIOD WITHIN 5 Calendar Days AFTER RECEIPT OF P.O.
 4 WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPPLIES & MATERIALS, ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY THE PROCURING ENTITY
 5 PRICE VALIDITY SHALL BE FOR A PERIOD OF 60 CALENDAR DAYS
 6 **OMNIBUS STATEMENT, VALID MAYOR'S PERMIT, BIR CERTIFICATE OF REGISTRATION, CURRENT INCOME TAX RETURN, PHILGEPS REGISTRATION NUMBER and DOH-FDA LTO** SHALL BE ATTACHED UPON SUBMISSION OF THE QUOTATION
 7 SUBJECT TO SUBMISSION OF LEGAL DOCUMENTS FOR THE DETERMINATION OF TECHNICAL, LEGAL, AND FINANCIAL CAPABILITY OF SUPPLIER
 8 SUBJECT TO REVIEW BY THE COMMISSION ON AUDIT AND IF EVER FOUND TO BE OVERPRICED, YOU ARE BOUND TO REFUND THE AMOUNT SAID TO BE EXCESSIVE.

ITEM NO.	ITEM AND DESCRIPTION	BRAND	QTY	UNIT	UNIT Price	TOTAL COST
1	Paracetamol 500mg		300	tablets		
2	Loperamide 2mg		100	tablets		
3	Dicycloverine 10mg		20	tablets		
4	Multivitamins		6000	tablets		
5	Phenylephrine Chlorphenamine Maleate Paracetamol		100	tablets		
6	Cetirizine 10mg		200	tablets		
7	Carbocisteine 500mg		200	capsules		
8	Calcium Carbonate Magnesium Hydroxide Fanotadine		50	tablets		
9	Bacitracin Ointment 15gms		30	tubes		
10	Burn Ointment 15gms		5	tubes		
11	Pramoxine Lotion 120ml		10	bottles		
12	Povidone Iodine 10% 120ml		15	bottles		
13	Liniment Oil 120ml		60	bottles		
14	Menthol Crystals Menthol Salicylate Eucalytus Oil (big)		10	bottles		
15	Liniment Patches		40	patches		
16	After Sun Lotion		10	pcs		
17	Pain Relief Spray		10	bottles		
18	Surgical Gloves		10	boxes		
19	Surgical Mask		5	boxes		
20	Disinfectant 500ml		2	bottles		
21	Digital Thermometer		10	pcs		
22	Cotton Applicator Big (sterile)		50	pcs		
23	Cotton Buds Non Sterile		200	pcs		
24	Cotton Balls (Sterile)		5	packs		
25	Plasters for Wounds		5	boxes		
26	Elastic Bandage		50	pcs		
27	Zinc Oxide Tape 1/2"		20	pcs		
28	Cooler (medium size)		1	pc		
29	Energy Drink		3,900	bottles		
30	Hot and Cold Dispenser		1	pc		
31	Ice Wrapper		20	packs		
32	Bathroom Weighing Scale		1	pc		

ITEM NO.	ITEM AND DESCRIPTION	BRAND	QTY	UNIT	UNIT Price	TOTAL COST
33	First Aid Kit		5	pcs		
34	Nail Cutter		10	pcs		
35	Garbage Bag		100	pcs		
36	Blood Pressure Kit Set		1	set		
	TOTAL					

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Delivery Period : _____
Warranty : _____
Price Validity : _____

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

Signature Over Printed Name
Tel. No. : _____
Cell No. : _____
Email Add. : _____
Date : _____