



REQUEST FOR QUOTATION

Date:  
Quotation No.

Company Name: \_\_\_\_\_  
Address \_\_\_\_\_

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 \_\_\_\_\_ in the return envelope attached herewith.

**ABDULRAHMAN N. POLO, LPT**  
OIC-Procurement Officer

- NOTE:
- 1. ALL ENTRIES MUST BE TYPEWRITTEN
  - 2. DELIVERY PERIOD WITHIN \_ CALENDAR DAYS
  - 3. 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
  - 4. PRICE VALIDITY SHALL BE FOR A PERIOD OF 90 CALENDAR DAYS
  - 5. BIDDERS SHALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATES OF THE PRODUCT BEING OFFERED.
  - 6. PLEASE SUBMIT THE FOLLOWING ELIGIBILITY DOCUMENTS:  
A. Business Permit B. Philgeps Certificate/Membership C. Omnibus Sworn Statement if ABC is Above 50,000.00 D. PCAB License

**Medical Supplies: Approved budget for the contract (ABC) -54,370.00**

NO.	ITEM & DESCRIPTION	QTY.	Unit	UNIT PRICE	TOTAL
	<b>Medical Supplies</b>				
1	Pulse Oximeter (Rechargeable)	1	unit		
2	Spine Board	1	unit		
3	Manual Blood Pressure Monitor	1	unit		
4	Dental UV Sterilizer	1	unit		
5	Digital Forehead Thermometer	1	unit		
6	Nebulizer, Portable, Heavy Duty	1	unit		
7	Digital BP Apparatus, Heavy Duty	1	unit		
8	Wheel Chair for PWD Adult Fold Portable Lightweight Aluminum Alloy Steel	1	unit		
9	Stethoscope, Classic	1	unit		
10	Stainless Steel Spring shock adult crutch adjustable pair/single crutch walking aide, thick stainless steel, nine level adjustable, wear-resistant non-slip foot pads, TPR material grip and armrest, damping soring size 127-147cm, set	1	unit		
11	Examination Bed Hamilton Type, with Drawer and Compartment door, uphoistered three section top, provided with stirrup and sliding foot stool, 56 inches x 20 inches x 34 inches	1	unit		
	*****nothing follows*****				
	<b>Total</b>				

Delivery Period :  
Warranty :  
Price Validity :  
After having read and accepted your General Condition, I/We quote you on the item at price noted above.

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Printed Name/Signature

Tel. No./Cellphone No.

E-mail Address