

Republic of the Philippines
DEPARTMENT OF EDUCATION
 Region VII, Central Visayas
DIVISION OF BOHOL
 City of Tagbilaran

REQUEST FOR QUOTATION

RFQ NO.: 2022-10-0453
 DATE: 10-25-2022

Name of Company: _____
 Address: _____
 Business Permit No. _____
 TIN No. _____

Please quote your best offer for the item described below, subject to the Terms and Conditions provided at the dorsal portion of this request for quotation.

Submit your quotation duly signed by you or your duly representative and copies of the following eligibility requirements not later than _____.

1. DTI/SEC Registration
2. Business Permit
3. Latest Annual Income Tax/EFPS
4. Certificate of PhilGEPS Registration
5. Other Supporting Documents

Sealed Quotations may be submitted or mailed at DepEd-Division Office, Division of Bohol, CPG Avenue, Tagbilaran City.


DR. DANILO G. GUDEOSAO
 BAC Chairperson

After having carefully read and accepted the Terms and Conditions, I/we submit your quotation/s for the item/s as follows:

Item/Description	QTY	Unit	Approved Budget for the Contract	OFFER					
				PRICE			Compliance with Technical Specifications (Please Check)		REMARKS
				QTY	Unit Price	Total Price	Yes	No	
Procurement of Medicines and Supplies for Health and Nutrition Section									
Aluminum Hydroxide, Magnesium Hydroxide, 100pcs/box	10	box	6,000.00						
Omeprazole 20mg/capsule, 100caps/box	10	box	8,000.00						
Sodium Ascorbate with Zinc 600mg/10mg capsule, 100pcs/box	240	box	156,000.00						
Oral Rehydrating Solution powder, 25sachets/box	10	box	3,500.00						
Zinc Oxide + Calamine ointment sachet, 20sachet/box	30	box	15,000.00						
Ice bag	10	pcs	1,000.00						
Hot water bag	10	pcs	1,000.00						
Losartan 100mg tablet, 100pcs/box	10	box	5,000.00						
Amlodipine 10mg, 100pcs/box	10	box	4,000.00						
Metformin 500mg, 100pcs/box	10	box	5,000.00						
Paracetamol 500mg, 100pcs/box	30	box	12,000.00						

Cetirizine 10mg, 100pcs/box	10	box	5,000.00						
Surgical Face Mask 3Ply, 50pcs/box	250	box	25,000.00						
70% Isopropyl Alcohol 500ml bottle	250	bottle	37,500.00						
Manual Blood Pressure Apparatus (Adult)	2	unit	4,000.00						
Fingertip Pulse Oximeter	2	unit	2,200.00						
Methyl Salicylate, Camphor Menthol 50ml/bottle	18	bottle	1,800.00						
Mupirocin ointment	20	tube	6,000.00						
SARS CoV2 Rapid Antigen Test Kits, 25pcs/box	18	box	162,000.00						
TOTAL			460,000.00						
X-X-X-X-X-X-X-X-X-X									

Purpose: for the School Health and Nutrition Section use.

(Signature Over Printed Name)

Terms and Conditions

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of Thirty (30) calendar days from the date of submission.
3. Price quotation/s, to be denominated in Philippine Peso shall include all taxes, duties and/or levies payable.
4. Quotations exceeding the Approved Budget for the Contract shall be rejected.
5. Award of contract shall be made to the lowest quotation (for goods)
6. Any interlineations, erasures or overwriting shall be valid only if they are signed or initiated by you or any of your duly authorized representative/s.
7. The item/s shall be delivered on the date and place specified in the purchase order and shall commence from the receipt thereof.
8. The Inspection Committee shall have the right to inspect and/or to test the goods to confirm their conformity of the technical specifications.
9. Liquidated damages equivalent to the one-tenth of one percent of the value of the goods not delivered within the prescribed delivery period shall be imposed per day of delay. The Head of the Procuring Entity shall rescind the contract once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, without prejudice to other courses of action and remedies open to it.