

Republic of the Philippines Department of Health SAN LAZARO HOSPITAL

Manıla, Philippines



FAX: 711-6973

REQUEST FOR QUOTATION

Date:

September 11, 2019

Sir/Madam:

Please give your quotation at Government prices on the following articles/materials urgently needed to be purchased by this hospital.

- a., -		UNIT	Cours of the state		Å	PRICE OFFER
Item#	Qty	UNIT	DESCRIPTION OF ARTICLES	UNIT PRICE	TOTAL PRICE	
1	180	bxs	SYRINGE: 10cc with needle 21x1 1/2, disposable, sterile, box of 100's	286.00	51,480.00	•
2	1,000 bxs		SYRINGE: Insulin 29x 1/2, 100IU, 1ml, disposable, sterile, box of 100's	391 00	391,000 00	
			xxxxxxxxxxxx			
$oxed{oxed}$						
			VAT Inclusive			'
			TOTAL AMOU	NT BIDDED	Php442,480 00	
			Basic Requirements (3 sets in sealed envelope)			
		,	* Certified true copy Philipeps Certificate * Certified true copy Mayors Permit * Certified true copy Registration Certificate * Contribut true copy Registration Tax			-
	•		* Certified true copy Business/Income Tax * Omnibus Sworn Statement duly notarized	l		
			Deadline for Submission of Bids September 19, 2019 @ 10:00 am			
			Venue Procurement Department (Engineering Bldg)			

Important:

- 1 This is an emergency purchase and all items/materials listed must be delivered within seven (7) working days after the receipt of the approved PURCHASE ORDER.
- 2 A winning dealer who fails to make delivery of the items being purchased within specified date, whether in whole or in part, SHALL BE CONSIDERED A DEFAULTING BIDDER and shall therefore be subject to OPEN MARKET of the items/materials NOT DELIVERED and the DIFFERENCE IN PRICE to be charged against said defaulting bidder.
- 3 The Government reserves the right to reject any or all bids or quotations, without thereby incurring any liability, and make no assurance that a contract shall be entered into as a result of the canvass.

Name of Compa	ny					DOMINICK M. DIAZ, MGM	
Address	ss '					Supervising Administrative Office	
		-	_	,	7	Head Procurement Dept	
			1 7	_ 1		6.0	
Telephone #						1 /~~	
Authorized Representative					1	NENITA S. YIA	
_						Cahvasser	

Note Kindly Fax The Quotation at 711-6973 FM-HOPSS-PROC-004 Date Effective April 25, 2019

SLH-QMS CONTROLLED COPY

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