



REQUEST FOR QUOTATION
ALTERNATIVE METHOD OF PROCUREMENT

DATE: 10-15-19

Sir/Madam:

Please give your quotation at Government price on the following articles/materials urgently needed to be purchased.

ITEM	QTY.	UNIT	DESCRIPTION OF ARTICLES	UNIT COST	TOTAL COST	PRICE OFFER
1	6	bot	Gram Stain Kit, contains crystal violet,iodine,decolorizer, zafranin, 4 pc x 250ml bot	3,500.00	21,000.00	
2	1	pk	MIC strip, Azithromycin, strip, 100 pc/pk	48,000.00	48,000.00	
3	1	pk	MIC strip, Cefixime, strip, 100 pc/pk	48,000.00	48,000.00	
4	1	pk	MIC strip, Ceftriaxone, strip, 100 pc/pk	48,000.00	48,000.00	
	1	pk	MIC strip, Gentamycin, strip, 100 pc/pk	48,000.00	48,000.00	
5	5	pk	Neisseria/Haemophilus ID System, 20T/kit, Identification system to include all reagents needed	15,000.00	75,000.00	
6	10	bx	VCN Inhibitor, liquid, 10 pc x 10ml /box	6,000.00	60,000.00	
			REQUIREMENTS: (3 SETS IN SEALED ENVELOP EACH)		348,000.00	
			1. PhilGeps Certificate (Platinum) (certified true copy)			
			2. Registration Certificate (SEC/DTI) (certified true copy)			
			3. MAYOR'S / BUSINESS PERMIT (certified true copy)			
			4. INCOME BUSINESS TAX RETURN (certified true copy)			
			5. OMNIBUS SWORN STATEMENT			
			6. DATE OF SUBMISSION			
			ON Sept. 25, 2019 at 10:00 am. AT PROCUREMENT DEPT.			
			VAT Inclusive :			

Important:

- 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.
- 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 subjected to OPEN MARKET of the items/materials NOT DELIVERED and the DIFFERENCE IN PRICE to be charged against said defaulting bidder.
- 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 Company: _____

Address: _____

Telephone #: _____

Authorized Representative: _____

Note: Kindly Fax the Quotation at 711-6973

DOMINICK M. DIAZ, MGM
Head, Procurement Department

FREDERICK L. VILLAS
Canvasser