



Republic of the Philippines
UNIVERSITY OF RIZAL SYSTEM
Province of Rizal


Cp No. (63)918-9519618
urs.bacsecretariat2020@gmail.com

Date : 5/29/23

Company/Supplier 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 sealed quotation duly signed by your representative not later than 6/05/23 to URS SPMO, Morong Rizal.


NELSON S. GONZALES, Ed. D.
Chairperson, BAC

- NOTE: 1. ALL ENTRIES MUST BE TYPEWRITTEN
2. DELIVERY PERIOD WITHIN 20 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 ENTITY
4. PRICE VALIDITY SHALL BE FOR A PERIOD OF 45 CALENDAR DAYS
5. G-EPS REGISTRATION CERTIFICATE SHALL BE ATTACHED UPON SUBMISSION OF THE QUOTATION
6. BIDDERS SHALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATIONS OF THE PRODUCT BEING OFFERED

ITEM NO.	ITEM & DESCRIPTION	QTY.	UNIT	BID PRICE	TOTAL BID PRICE
1	Pulse Oximeter	3	unit(s)		
2	Aneroid Sphymomanometer	5	unit(s)		
3	Cefalexin 500mg	300	pc(s)		
4	Cloxacillin 50mg/cap	500	pc(s)		
5	Medicated Muscle Spray	5	bottle(s)		
6	garbage bag 13*13*32 (yellow, green, black)	3	pack(s)		
7	70% Isopropyl Alcohol	5	bottle(s)		
8	Meclizine 25mg	100	pc(s)		
9	Dequalinium Chloride	100	pc(s)		
10	Hyoscine-N-butylbromide	300	pack(s)		
11	Bandage	100	box(es)		
12	Bacillus Clausii	50	pc(s)		
13	Hyoscine-N-butylbromide + Paracetamol	100	pc(s)		
14	Mefenamic Acid 500mg	500	pc(s)		
15	Calamine Lotion 60 ml	5	pc(s)		
16	Dextromethorphan hydrobromide + Phenylpropanolamine hydrochloride + Paracetamol	300	pc(s)		
17	Paracetamol 500mg	500	pc(s)		
18	Amoxicillin 500mg	300	pc(s)		
19	Povidone Iodine Dry Powder Spray	5	bottle(s)		
20	PPA + CPM + Paracetamol	500	pc(s)		
21	Celecoxib 200mg	200	pc(s)		
22	Antihistamine	300	pc(s)		
	nothing follows				
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	ABC - Php 75,965.00				

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Brand and Model : _____
Warranty : _____

Delivery Period : _____
Price Validity : _____

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

CERTIFICATION

I hereby certify that I have personally conducted this canvass and that the price(s) quoted is/are true & correct and the signature of the representative of the company who submitted the quotation(s) is/are genuine.

Printed Name / Signature

Tel. No. / Cell phone No.

E-mail address

Date

Tin Number

Printed Name & Signature of Authorized Canvasser

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Rev. 00

Effectivity Date August 15, 2017

Modified version of RFQ form from
(SF-GOOD-60, May 2004)

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