Republic of the Philippines

REGION II TRAUMA AND MEDICAL CENTER

Bayombong, Nueva Vizcaya Telefax No. (078-392-0190) Email: mcc@ritmc.doh.gov.ph;procurement@ritmc.doh.gov.ph

REQUEST FOR QUOTATION

Date: June 7,2023 PR No.: 06-1244-23

Sir/Madam:

Please quote your lowest price on the article services noted below in the spaces indicated, and as soon as possible, please submit your quotation in a sealed envelope to the undersigned.

JULIET C. BUSTILLOS, MPA Supervising Administrative Officer

| QTY | UNIT | ITEMS | ABC/unit | BRAND & MODEL | UNIT PRICE | TOTAL PRICE |
|-----|------|--|----------|---------------|------------|-------------|
| 150 | pcs | Enteral Feeding Container with tubing, roller clamp and connector, calibrated up to 60cc by 10cc increment | 500.00 | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | Secondary Requirement/s to be submitted before issuance of Purchase Order. Mayor's/ Business Permit | | | | |
| | | PhilGEPS Registration Number: Omnibus Sworn Statement Certificate of Availability of Stocks | | | | |
| | | Terms and Conditions: The Project shall be awarded as one contract. | | | | |
| | | Delivery charge must be included to the unit price of your proposal and specify the validity of th Delivery term: within 10 calendar days upon receipt of Approved Purchase Order and must be disasterials Management Office during Mondays-Fridays (8:00am- 5:00pm) | | | | |
| | | Payment Term: within 30 calendar days after the Final Acceptance 2023 Please submit in a sealed envelope on or before: | | | | |
| | | FOR HOSPITAL USE | | | | |
| | | Note: Subject to 5% WT and 1%FT for VAT Registered Supplier | | | | |

1. The Hospital Bids and Awards Committee has the right to accept, reject and waived defects in canvass.

2. It is a pre-condition to the acceptance of this quotation and the Purchase Order that in case of disallowance in post-audit due to overpricing, the supplier shall be held solely reponsible for refund thereof.

Canvassed by:

GARDNER CHEK . SANIATAN Contact #: 0916-694-1317

Name & Signature of Dealer

Company

Date