

Republic of the Philippines
BIDS AND AWARDS COMMITTEE
 (Goods and Services)
 City Government of Baguio
 Baguio City

Standard Form No.: SF - GOODS-60
 Revised on: September 5, 2016
 Standard Form Title: Request For Quotation

Reference No: 1599
 Solicitation No: 1108 Small
 Value Procurement
 Date: September 4, 2018
 OBR #


Sir/Madam:

Please quote your price of item.s listed below as per specifications, stating the shortest time of delivery. Please submit your quotation duly signed by you or your representative to the Bids and Awards Committee not later than 2:00 PM _____ c/o the BAC Secretariat, City General Services Office, City Hall, Baguio City. you may fax your quotations through Telefax No. (074)424-5148.

We may purchase the item/s from your company if the offer is found to be reasonable and advantageous to the City Government of Baguio. But we reserve the right to accept or reject the offer or all quotation found not in order.

Thank you very much.

NOTE:


ATTY. LETICIA O. CLEMENTE
 BAC Chairperson and City Budget Officer

"PLEASE SEAL YOUR BIDS"

ITEM NO.	QTY	UNIT	DESCRIPTIONS	TOTAL ABC	BID PRICE PER UNIT	TOTAL BID PRICE
1	1	LOT	Medical Supplies c/o HSO	126,245.00		
	13	box	Disposable syringe - 10ml w/ needle,G.21x1(disposable)100's -			
	2	box	Disposable Syringe - 5ml w/ needle,G.21x1(disposable) 100's -			
	25	box	Intravenous Catheter Set - Adult, G21 , 100's -			
	50	box	Syringe - 3ml w/ needle,G.23x1(disposable), 100's -			
	30	box	Syringe - 10ml with needlr G21 x 1, 100's -			
	50	box	Syringe - 1mL, w/ needle, G26 x 1/2" single use, sterile, non-toxic, Non -Pyrogenic, Latex free 100's			

****Please submit and accomplish the attached Omnibus Sworn Statement together with this form****

PURPOSE: For medical supplies c/o HSO.

- NOTED:
- 1) Delivery Period within _____ calendar days
 - 2) price Validity shall be for a period of _____ calendar days
 - 3) Warranty (for equipments) _____ Minimum of 1 year
 - 4) Bid Price should be inclusive of VAT and delivery charges
 - 5) Please indicate the brand of your offer. For machines/equipment, please attach brochure.

 Name of Establishment

 Philgeps Registry No.

 Printed Name and Signature of Bidder

 Address and Contact Number

 TIN