



Republic of the Philippines  
BULACAN STATE UNIVERSITY  
City of Malolos, Bulacan  
PROCUREMENT OFFICE

QUOTATION NO. 24-04-0286

REQUEST FOR QUOTATION

Tel./ Fax (044) 798-7755 | Email: procurement@bulsu.edu.ph

I. INSTRUCTIONS TO BIDDERS

1. Please indicate the following information in your bid
- a. Company name, Address, Contact No., TIN, E-Address and delivery Period  
Bank name and Account no.

c. Unit Price, Total Price and Total Amount  
d. Name of Bidder's Authorized Representative  
e. Signature and Date
- b. Bidder's offer/warranty period (technical specifications/ brand) per item
2. All Mandatory *with asterisk (\*)#4* must be complied with. Failure to comply with the mandatory requirements shall render the quotation ineligible/ disqualified.

*Other Instruction and Terms and Conditions please see it at the back of this page.*

Note: BulSU reserves the right to accept or reject any or all of the quotations to waive formally therein, or to accept quotation/s as may be considered most advantageous to the government or to pursue appropriate legal action should the winning bidder refuse to accept the award without justifiable reason/s

II. ELIGIBILITY AND OTHER REQUIREMENTS

Suppliers are required to submit the following documents simultaneous with submit of bid offer/s:

1. Valid and Current Mayor's / Business Permit
2. Valid and Current PhilGEPS Registration Certificate / Number
3. Income / Business Tax Return (for ABC's Above Php 500,000.00)
4. Omnibus Sworn Statement (for ABC's above Php 50,000.00)
5. Philippine Contractors Accreditation Board License (Infrastructure)
6. Professional Liscense/Curriculum Vitae (Consulting Services)

III. TO BE FILLED BY PROCUREMENT PERSONNEL

DATE CREATED : APRIL 16, 2024

DEADLINE OF SUBMISSION : APRIL 22, 2024

MODE OF PROCUREMENT : SMALL VALUE PROCUREMENT [Sec. 53.9]

ENDUSER : HEALTH SERVICES

PR. NO. : F-2024-03-0135 / G-2024-04-0452

APPROVED BUDGET FOR THE CONTRACT: 316,000.00

PURPOSE: Medical and Dental supply including satellite campuses. / For DRRM and office use.

| NO. | QTY. | UNIT   | GENERAL NAME OF THE ITEM | REQUIRED ITEM SPECIFICATION  | UNIT COST | BIDDER OFFERED SPECIFICATION | QUOTED UNIT PRICE | TOTAL QUOTED PRICE |
|-----|------|--------|--------------------------|--|-----------|------------------------------|-------------------|--------------------|
| (a) | (b)  | (c)    | (d)                      | (e)  | (f)       | (g)                          | (h)               | (b*h)              |
| 1   | 3    | unit   |                          | Weighing scale, physician's type with calibration and preventive maintenance   |           |                              |                   |                    |
| 2   | 6    | pcs    |                          | Spine Board with strap/belt heavy duty   |           |                              |                   |                    |
| 3   | 6    | pcs    |                          | Head immobilizer for spine board   |           |                              |                   |                    |
| 4   | 4    | unit   |                          | Medical screen panel, 3 panels, High quality fabric, stainless frame with wheels   |           |                              |                   |                    |
| 5   | 6    | set    |                          | Rescue padded board splint (blue), 1 set   |           |                              |                   |                    |
| 6   | 6    | pcs    |                          | BP Apparatus Desk Type   |           |                              |                   |                    |
| 7   | 1    | pcs    |                          | Scoop stretcher with strap/belt aluminum   |           |                              |                   |                    |
| 8   | 1    | pcs    |                          | Single foot stool, stainless   |           |                              |                   |                    |
| 9   | 15   | pcs    |                          | Electric warm compress, rechargeable   |           |                              |                   |                    |
| 10  | 12   | roll   |                          | Plaster adhesive, 2.5cmx5m   |           |                              |                   |                    |
| 11  | 300  | pcs    |                          | Reusable Gel Ice bag insulated dry cold ice pack 200ml   |           |                              |                   |                    |
| 12  | 10   | pcs    |                          | Sharps Disposal Safe, 5 liters, yellow with label  |           |                              |                   |                    |
| 13  | 2    | pack   |                          | Celluloid strips, 50 strips/pack   |           |                              |                   |                    |
| 14  | 1    | set    |                          | Flowable Light cure composite kit with different shades  |           |                              |                   |                    |
| 15  | 3    | pack   |                          | Sand paper strips, dental 4mm 20pcs/ pack  |           |                              |                   |                    |
| 16  | 3    | pack   |                          | Sand paper strips, dental 6mm 20pcs/ pack  |           |                              |                   |                    |
| 17  | 5    | pack   |                          | Self curing dental powder, pink  |           |                              |                   |                    |
| 18  | 5    | pack   |                          | Self curing dental powder, white   |           |                              |                   |                    |
| 19  | 5    | bottle |                          | Self curing liquid, 240ml  |           |                              |                   |                    |
| 20  | 5    | pack   |                          | Polycarboxylate cement, dental   |           |                              |                   |                    |
| 21  | 5    | box    |                          | Dental Syringe, Short, 100 pc/box  |           |                              |                   |                    |
| 22  | 14   | pcs    |                          | Dental Syringe, Short, 100 pc/box<br>Stethoscope Clinical Lite, various colors   |           |                              |                   |                    |
|     |      |        |                          | Specifications:<br>Classic Dual Head Stethoscope made from anodized aluminum for extreme lightweight.<br>- Fiberglass diaphragm side is utilized to optimally detect S1 and S2 heart sounds as well as Korotkoff sounds<br>- Bell side is optimally designed for assessing S3 and S4 heart sounds<br>- Incorporates a snap-on diaphragm retaining ring and a non-chill bell ring which contributes to the ease of use and maintenance, while enhancing patient comfort |           |                              |                   |                    |



|   |     |      |  |   |  |  |  |  |
|---|-----|------|--|---|--|--|--|--|
| 23  | 7   | pcs  |  | Rescue/Trauma bag. - Red, medium size<br><b>Specifications:</b><br>Medical Rescue Bag Features A 3 Section Central Compartment<br>- 2 Zipper Side Pockets And 2 Open Top Front Pockets<br>- Zipper Pocket Inside Front Flap With Tool Loops<br>Front Flap With Quick Release Buckle And Hook And Loop Closure<br>-Detachable And Adjustable Shoulder Strap<br>- Top Carry Handle<br>-Reflective Star Of Life Emblem Rugged<br>-Polyester Material<br>-(L33 x W20 x H20) |  |  |  |  |
| 24  | 60  | pcs  |  | ELASTIC BANDAGE 2", velcro type   |  |  |  |  |
| 25  | 60  | pcs  |  | ELASTIC BANDAGE 4", velcro type   |  |  |  |  |
| 26  | 50  | pcs  |  | NASAL OXYGEN CANNULA (Adult)  |  |  |  |  |
| 27  | 10  | pcs  |  | NEBULIZER KIT TUBING (Adult)  |  |  |  |  |
| 28  | 1   | box  |  | Disposable syringe, 3cc, 100's  |  |  |  |  |
| 29  | 10  | pack |  | PAPER CUPS 6.5 oz 50pcs/ pack   |  |  |  |  |
| 30  | 25  | box  |  | Brand ADHESIVE BANDAGE (50PCS/BOX), BREATHABLE PROTECTION, STRONG ADHESION, stays on even when wet  |  |  |  |  |
| 31  | 3   | roll |  | ABSORBENT GAUZE ROLL BIG  |  |  |  |  |
| 32  | 50  | pcs  |  | IV Splint, adult, various colors  |  |  |  |  |
| 33  | 1   | box  |  | Polyglactin 910, Surgical sterile suture, violet braided, synthetic, absorbable 4-0, sterile, atraumatic, 19mm, cutting needle 3/8c, 45cm, 12 pcs/box<br>Monofilament, non absorbable surgical sterile suture, 5 0, cutting needle 3/8c, 16mm, 12 pcs/box   |  |  |  |  |
| 34  | 1   | box  |  | Monofilament, non absorbable surgical sterile suture, 5 0, cutting needle 3/8c, 16mm, 12 pcs/box  |  |  |  |  |
| 35  | 1   | box  |  | Catgut 3-0, absorbable suture, sterile, atraumatic taper, round bodied 26mm, 1/2 circle, 12 pcs/box   |  |  |  |  |
| 36  | 1   | box  |  | Silk 2-0 braided non-absorbable suture, 76cm, sterile, 3/8 cutting, 12 pcs/box  |  |  |  |  |
| 37  | 1   | box  |  | Insulin Syringe, lcc, 100pcs/box  |  |  |  |  |
| 38  | 100 | pack |  | Interfolded Paper Towels (175 pulls)/ pack  |  |  |  |  |
| NOTE:<br>1. EXPIRATION DATE MUST BE AT LEAST 2 YEARS FROM THE DATE OF DELIVERY<br>2. WITH LICENSE TO OPERATE ISSUED BY FDA<br>3. Must be delivered 5-7 days after notice of award |     |      |  |   |  |  |  |  |
| <b>OSSDRM</b>   |     |      |  |   |  |  |  |  |
| 1   | 3   | pcs  |  | Padded Splint set<br>Specs: 1/2 X 3-in wood and 1/2-in foam on one side of splint<br>(2) 15 inches, (2) 36 inches (2) 54 inches   |  |  |  |  |
| 2   | 35  | pcs  |  | Triangular Bandage (Cotton)<br>Size: 40 inches x 40 inches x 56 inches  |  |  |  |  |
| 3   | 7   | sets |  | Spine Board Complete Set (strap and head immobilizer)<br>Color: Orange<br>Size: 184cm x 45 cm x 6cm   |  |  |  |  |
|   |     |      |  | <b>BY LOT</b>   |  |  |  |  |
|   |     |      |  |   |  |  |  |  |
|   |     |      |  | <b>NOTE:</b>  |  |  |  |  |
|   |     |      |  | <b>Please attach brochure and indicate days of delivery</b>   |  |  |  |  |
|   |     |      |  | <b>Conduct a site inspection prior to submitting the quotation, for goods that require installation</b>   |  |  |  |  |
|   |     |      |  |   |  |  |  |  |
| <b>TOTAL QUOTED AMOUNT</b>  |     |      |  |   |  |  |  |  |

|   |  |   |  |
|---|--|---|--|
| IV. MANDATORY TO BE FILLED OUT BY BIDDER  |  | IV. SIGNATURE OF AUTHORIZED PERSONNEL       |  |
| COMPANY NAME/   |  | DATE OF CANVASS: _____                      |  |
| BANK NAME* : _____  |  | Canvassed by: _____                         |  |
| BANK ACCOUNT NO. : _____  |  | _____                                       |  |
| ADDRESS* : _____  |  | Buyer's Name and Signature _____ Date _____ |  |
| TAX ID NO.* : _____   |  | _____                                       |  |
| CONTACT NO.* : _____  |  | Buyer's Name and Signature _____ Date _____ |  |
| EMAIL ADDRESS* : _____  |  | _____                                       |  |
| DELIVERY PERIOD* : _____  |  | _____                                       |  |
| Bidders Declaration:  |  | BY THE AUTHORITY OF THE PROCUREMENT OFFICE  |  |
| We have "Read and Agreed with the instructions and Terms and Conditions" stated in this quotation and "Reviewed and Compiled" with detailed specifications signed by duly authorized representative of our company. |  | _____                                       |  |
| _____   |  | ATTY. JEANETTE B. ESPLANA _____ 4-16-24     |  |
| Bidder's Authorized Representative _____  |  | Head of Procurement Office _____            |  |
| (Printed Name and Signature)  |  | Date _____                                  |  |
| Date _____  |  | _____                                       |  |
| BuISU-OP-PU-03F3  |  | _____                                       |  |
| Revision: 2   |  | _____                                       |  |
| ROIE 4.16.24  |  | _____                                       |  |