

Republic of the Philippines **BULACAN STATE UNIVERSITY** City of Malolos, Bulacan

REQUEST FOR QUOTATION FOR THE PROCUREMENT OF GOODS AND SERVICES

| **Mandatory to fill in** | |
|---------------------------|---|
| COMPANY NAME: | Quotation No. 22-11-754 |
| CONTACT No. | Purchase Request No. F-2022-10-0507 |
| Address: | Purpose: For infirmary use |
| TIN No. | ABC: 50,190.00 |
| PhilGEPS Registration No. | Delivery Period: 7 Calendar Days upon receipt of Purchase |
| EMAIL ADDRESS: | Order |

INSTRUCTIONS TO SUPPLIERS:

- 1. Please **quote your lowest price** on the item/s listed below **comprising the necessary taxes.**
- 2. It is mandatory to **indicate the brand** and/**or model** of the items being offered and to **attach a brochure** thereof
- 3. Indicate the warranty period in cases of equipment or whenever applicable.
- 4. Forthwith submit the accomplished quotation **duly signed by your representative.**
- 5. Suppliers are required and mandated to attach and submit the following documentary requirements:
- a) Valid Mayor's/Business Permit; b) BIR Certificate of Registration; c) Authority to Print Receipt; d) PhilGEPS Membership Certificate e) Omnibus Sworn Statement
- 6. All items must conform with the internationally accepted standard and sub-standard items shall not be accepted.

| ITEM NO. | ITEM & SPECIFICATION | QTY/UNIT | BRAND & MODEL OFFERED | UNIT PRICE | TOTAL PRICE |
|----------|---|------------|-----------------------|---------------------------------------|-------------|
| 1 | Loperamide 2mg, 100pcs/box | 20 box | | | |
| | Glucometer Test Strip, 50 pcs/box | | | | |
| 2 | *for Accu-Chek Active | 5 box | | | |
| | *Code: 333 | | | | |
| 3 | Sterile Latex Surgical Gloves, powder free, Size 7, 50 pairs/box | 3 box | | | |
| 4 | Sterile Specimen Bottle | 100 bottle | | | |
| 5 | 5cc Disposable syringe, 100 units | 2 box | | | |
| 6 | 3cc Disposable syringe, 100 units | 3 box | | | |
| 7 | 1cc Disposable syringe, 100 units | 3 box | | | |
| 8 | Sterile needle g.25, 100 units | 3 box | | | |
| 9 | Micropore Tape, hypoallergenic, 1 in x 10 yd, 12 pcs/box | 10 box | | | |
| 10 | Elastic Bandage, 2 in x 5 yd, clip type | 50 pc | | | |
| | Elastic Bandage, 3 in x 5 yd, clip type | 40 pc | | | |
| 12 | Elastic Bandage, 4 in x 5 yd, clip type | 30 pc | | | |
| 13 | Adhesive Bandage, antiseptic, wash proof, 50 strips/box | 50 box | | | |
| 14 | Garbage Bag, YELLOW, XL, 10 pcs/roll | 20 roll | | | |
| 15 | Garbage Bag, BLACK, XL, 10 pcs/roll | 20 roll | | | |
| 16 | Brown Bag, 55gsm, 150 x 90x 280 mm, 50 pcs/pack | 3 pack | | | |
| 17 | Paper Cups, 6.5 oz, 50 pcs/pack | 10 pack | | | |
| 18 | Nebulizing Kit | 50 pc | | | |
| 19 | Battery, CR2032, 3v | 10 pc | | | |
| 20 | Autoclave Tape Indicator, 1 inch 50 meters | 1 pc | | | |
| 21 | KF94 Face mask, high quality , Light grey, 10 pcs/pack | 50 pack | | | |
| | NOTE: | | | | |
| | 1. EXPIRATION DATE MUST BE AT LEAST 2 YEARS | | | | |
| | FROM THE DATE OF DELIVERY | | | | |
| | 2. WITH LICENSE TO OPERATE ISSUED BY FDA | | | | |
| | 3. BY LOT | | | | |
| | NOTE: Please attach brochure and indicate days | | | | |
| | of delivery | | | | |
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| 2. WITH LICENSE TO OPERATE ISSUED BY FDA | | | | | |
|--|--|---|----------------|---|--|
| 3. BY LOT | | | | | |
| NOTE: Please attach brochure and indicate days | | | | | |
| of delivery | | | | | |
| Accomplished by: | | By the authority of the University President. | | | |
| Supplier's Representative | | DR. DOLLY P. MAROMA | | | |
| (Print name and Signature) | | BAC Chairman | | | |
| Date Accomplished : | | Canvassed by: | | | |
| | | Nam | e and Signatur | e | |
| BulSU-OP-PU-03F3 | | | | | |
| Revision: 1 | | | | | |
| AM 11-3-2022 | | | | | |
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