



Republic of the Philippines  
DEPARTMENT OF HEALTH  
FIELD OPERATIONS  
CENTER FOR HEALTH DEVELOPMENT NO. 1  
ILOCOS TRAINING AND REGIONAL MEDICAL CENTER



PHIC Accredited Healthcare Provider

City of San Fernando, La Union  
Mother-Baby Friendly Hospital



"A No Smoking

Tel No. (072) 607-6418/6422; Telefax: (072) 700-3719 Email address:itrme2010@yahoo.com website: http://www.itrme.doh.gov.ph

Certified ISO9001:2015 since 2016 with Certificate No. SCP000121Q



## Request for Quotation

(Name and Address of Company)

Date :

September 11, 2020

Quotation No.:

2020-07-0942R

Please quote your lowest price (price must be inclusive of tax) on the item/s listed below, subject to the General Conditions, stating the shortest time of delivery and submit quotation duly signed by your representative and properly sealed.

NORBERTO G. PREPOSE, JR., RN, MAN  
HBAC Chairperson

### REQUIREMENTS:

- ALL ENTRIES MUST BE TYPEWRITTEN OR WRITTEN LEGIBLY.
- BIDDER SHALL ATTACH ORIGINAL OR SCANNED COPY (COLORED) OF BROCHURES SHOWING SPECIFICATIONS OF THE PRODUCT BEING OFFERED.
- BIDDER SHALL SUBMIT SAMPLE WITHIN TWO (2) WORKING DAYS (IF REQUIRED) UPON NOTICE.
- SUPPLIER SHALL SUBMIT WITHIN TWO (2) CALENDAR DAYS UPON NOTIFICATION FROM THE BAC SECRETARIAT THROUGH E-MAIL, TEXT MESSAGE OR PHONE CALL, THE FOLLOWING: MAYOR'S PERMIT, PROFESSIONAL LICENSE/CURRICULUM VITAE (FOR CONSULTING SERVICES), PHILGEPS REGISTRATION NUMBER, PCAB LICENSE (FOR INFRA), INCOME/BUSINESS TAX RETURN (FOR ABCs ABOVE PHP 500,000.00) AND OMNIBUS SWORN STATEMENT (FOR ABCs ABOVE PHP 50,000.00).

ITEM NO.	ITEM & DESCRIPTION	ABC PER UNIT	TOTAL ABC	QTY/UNIT	UNIT PRICE (inclusive of taxes)	TOTAL PRICE (inclusive of taxes)
1	Docetaxel 80mg	2,245.20	112,260.00	50 vial		
			112,260.00			

HBAC Resolution No. n/a

RFQ-2020-07-0942, July 22, 2020

supp-app-07-168 dated 7/21/20

PR/JO 2020-05-1548 (NP-SVP)

No.

Date: 5/11/2020

Brand and Model :

Delivery Period :

Warranty :

Price Validity :

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

Printed Name / Signature

Tel. No./Cellphone No./E-mail address

Date

Canvassed by:

ANNIE VILLAMIL MARLON RYAN ESPIRITU KRISTINE BALLON VANESSA CABADING DANIELLE ANNE F. DINGDING WINLOVE BORGONIA