



Republic of the Philippines
KALINGA STATE UNIVERSITY
BIDS AND AWARDS COMMITTEE
National Highway, Purok 6, Bulanao, Tabuk City, Kalinga
Website: <https://ksu.edu.ph> Email: procurementservice_bac@ksu.edu.ph Contact No.: 0917-774-4185

Procuring Entity	: KALINGA STATE UNIVERSITY	RFQ No.	: RFQ_GOODS_2018-12-72
Standard Form Title	: REQUEST FOR QUOTATION	Date	: DECEMBER 19, 2018
End-User Unit	: MEDICAL SERVICES	Implementing Unit	: DSASA

Name of Project	:	PURCHASE OF MEDICAL SUPPLIES AND MATERIALS
Location of Project	:	KALINGA STATE UNIVERSITY – BULANA O CAMPUS, TABUK CITY, KALINGA
Approved Budget for the Contract	:	Php 104,367.00
Period of Advertisement	:	DECEMBER 20-26, 2018 @ 10AM
Instructions to Bidders	:	Please quote your government price, taxes included and FOB, subject to the Terms and Conditions stated below and submit your quotation duly signed by your representative not later than ten o'clock in the morning (10am) of December 26, 2018 in a sealed envelope to the Office of the Bids and Awards Committee (BAC) stated above or thru e-mail at procurementservice_bac@ksu.edu.ph and shall be opened on the same day at 10:01 am.
Terms and Conditions	:	<p>A. All entries must be typewritten or legibly written.</p> <p>B. Price validity shall be for a period of 30 calendar days.</p> <p>C. The filled-out RFQ must be submitted by prospective bidder together with the following Attachments (duly signed):</p> <p>D. Financial Documents:</p> <p style="margin-left: 20px;">i. Bill of Quantities,</p> <p style="margin-left: 20px;">ii. Pictures or Brochure of Items as applicable.</p> <p>E. Eligibility/Legal Documents:</p> <p style="margin-left: 20px;">i. CY 2018 Mayor's/Business Permit,</p> <p style="margin-left: 20px;">ii. PhilGEPS Registration Number,</p> <p style="margin-left: 20px;">iii. Valid and current License to Operate (LTO) and its List of Sources issued by FAD of the DOH/BFAD; and</p> <p style="margin-left: 20px;">iv. Valid and current Certificate of Product Registration (CPR) issued by FAD of the DOH/BFAD</p> <p>F. The total price quoted is subject to withholding tax and payable check.</p> <p>G. Contract Duration is required within Thirty (30) calendar days.</p> <p>H. Any interlineations, erasures or overwriting shall be valid only if they are signed or initialed by the supplier or his/her duly authorized representative/s.</p> <p>I. The KSU reserves the right to accept or reject any or all quotations and to impose additional terms and conditions, as it may deem proper.</p> <p>J. During the Contract Implementation, the winning bidder is expected to adhere with the Green Procurement Programs of the government pursuant to EO No. 301 issued in 2004.</p>
Contact Person	:	MR. RONALDO B. DALUPING BAC Secretariat CP No. 0917-774-4185 Email Address: procurementservice_bac@ksu.edu.ph

AMADO P. IMPER, PhD
BAC Chairman



PRICE QUOTATION FORM

Date		
Company Name	:	
Business Address	:	
T.I.N.	:	
Contact Information	:	

After having carefully read and accepted your Terms and Conditions on the **PURCHASE OF MEDICAL SUPPLIES AND MATERIALS**, I/We hereby offer the price quotations on the items/s below:

ITEM NO.	ITEM AND DESCRIPTION	QTY	UNIT	UNIT PRICE	TOTAL PRICE
1	Amoxicillin, 500mg	40	boxes		
2	Cloxacillin, 500mg	5	boxes		
3	Erythromycin	2	boxes		
4	Chloramphenicol, 500mg	1	box		
5	Metronidazole, 500mg	1	box		
6	Alaxan Tablet, 500mg	2	boxes		
7	Biogesic, 500mg	7	boxes		
8	Mefenamic Acid, 500mg	30	boxes		
9	Dolfenal, 500mg	1	box		
10	Naproxen, 500mg	1	box		
11	Medicol Advance, 400mg	7	boxes		
12	Dynatussin, 100's	20	boxes		
13	Hyoscine (Buscopan), 10mg	2	boxes		
14	Dextromethorphan, 10mg	30	boxes		
15	Lagundi, 300mg	30	boxes		
16	Antamin, 4mg	10	boxes		
17	Maalox, 200mg	3	boxes		
18	Sambong, 250mg	5	boxes		
19	Cetirizine Dihci, 10mg, Ritemed	10	boxes		
20	Carbocisteine	5	boxes		
21	Robitussin Soft Gel, 200mg x 100's	7	boxes		
22	Superscent Oil, 100ml	5	bottles		
23	Ritemed Salbutamol, 2mg	2	bottles		
24	Bricanly Tablets, 30's	2	boxes		
25	Dermovate Cream, 5mg	3	tubes		
26	Bactroban Ointment, 5mg	3	tubes		
27	Rhea Vitamin B Complex	20	bottles		



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ITEM NO.	ITEM AND DESCRIPTION	QTY	UNIT	UNIT PRICE	TOTAL PRICE
28	Rhea Ascorbic Acid, 500mg	20	bottles		
29	UH Ferrous Sulfate	6	bottles		
30	UH MV +Minerals	10	bottles		
31	Chloramphenicol Eyedrops	12	tubes		
32	Eye Mo Daily Care 7.5ml	2	tubes		
33	Plain LRS	2	liters		
34	Povidone Iodine	1	gallons		
35	Chlorphenamine Ampule	12	ampules		
36	Losartan, 10mg x 100's	4	boxes		
37	Metoprolol, 50mg x 100's	1	box		
38	Micropore Plaster, 1.25cm	12	rolls		
39	Micropore Plaster, 2.5cm	12	rolls		
40	Insyte (US), gauge 22	2	pcs		
41	Medioplast Sterile Gauge, 4'x4'x12 ply, 100's	1	box		
42	Elastic bandage, 4"	5	pcs		
43	Elastic bandage, 6"	5	pcs		
44	Medioplast Band-aid	2	boxes		
45	Alcohol, 70% Biogenic Ethyl, 500ml	10	bottles		
46	Terumo Syringe with Needle, 3ml	50	pcs		
47	Terumo Disposable Needle Gauge 23	50	pcs		
48	Silk 1-0 non-abs suture w/ cutting needle	6	pcs		
49	Silk 3-0 non-abs suture w/ cutting needle	6	pcs		
50	Cotton Roll preferably sanicare	5	rolls		
51	Oxygen Mask	2	pcs		
Grand-total Amount (Php):					
Amount in words:					

Note: Delivery Period: **30 cd**

I hereby certify to comply with all the above Technical Specifications and deliver the above requirements.

 Name of Company/Bidder

 Signature Over Printed Name
 of Representative

 Date