



Republic of the Philippines
Province of Oriental Mindoro
Municipality of Gloria

Project Number: **2022-012-806**

Date: **July 12, 2022**

Project Title: **Supply and delivery of Medicines for Second Quarter for Municipal Health Office** Quotation No.: **RFQ-2022-044**

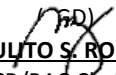
Location: **Municipal Health Office**

PhilGeps Ref: No.

REQUEST FOR QUOTATION

Supplier: _____
Address: _____
Contact Number: _____
TIN Number _____

Please quote your lowest price on the items/ listed below, subject to the General conditions on the last page, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than **July 15, 2022** in the return envelope attached herewith.


MANULITO S. RODRIGUEZ
MCR/BAC Chairman

Note:

- 1 All entries must be type written.
- 2 Delivery period is **within thirty (30) days**
- 3 Warranty shall be for the period of six months (6) months for supplies and materials, one (1) year for equipment, from date of acceptance by the procuring entity.
- 4 Price validity shall be for the period of thirty (30) calendar days.
- 5 G-eps registration certificate shall be attached upon submission of the quotation.
- 6 Suppliers shall submit original brochures showing certifications of the product being offered.

ITEM NO.	DESCRIPTION	QTY.	UNIT	UNIT PRICE	TOTAL PRICE
1	AT's 1500 IU	10	amp		
2	AT's 3000 IU	10	amp		
3	Amlodipine 5mg	185	box		
4	Amoxicillin 500mg cap	20	boxes		
5	Cefuroxime 500mg cap	5	boxes		
6	Cotrimoxazole 400mg susp	30	bot		
7	Cotrimoxazole 200mg susp	30	bot		
8	Cloxacillin 500mg	10	box		
9	Dicycloverine syrup	50	bot		
10	Eryhromycin ophthalmic ointment	2	tube		
11	Lagundi 600mg	10	box		
12	Lagundi 300mg	70	bot		
13	Losartan 5mg tab	190	boxes		
14	Mefenamic acid 500mg capsule	10	boxes		
15	Multivitamins + mineral cap	10	box		
16	Paracetamol 500mg	10	box		
17	Paracetamol drops	288	bot		
18	Speeda Anti Rabbits vaccine	10	vial		
19	Tranexamic Acid 500mg cap	2	boxes		
20	Vitamin B Complex tab	10	boxes		
21	Zinc Sulfate syrup	20	bot		
	Total				

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