



Republic of the Philippines  
Province of Oriental Mindoro  
Municipality of Gloria

Project Number: **2022-011-865**

Project Title: **Supply and delivery of Dental Supplies for Municipal Health Office**

Location: **MHO**

Date: **August 2, 2022**

Quotation No.: **RFQ-2022-049**

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 **August 5, 2022** in the return envelope attached herewith.

(SGD)  
**MANULIT J. 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	Anesthesia	32	boxes		
2	Needle	6	boxes		
3	Cotton Rolls	5	pcs		
4	Gloves (XL)	8	boxes		
	<b>Total</b>				

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