

Republic of the Philippines
City Government of Cagayan de Oro
BIDS AND AWARDS COMMITTEE

REQUEST FOR QUOTATION

Project Name: Supply and delivery of Blood Gas reagent and other items; PR 24-1393, dated April 22, 2024
Method of Procurement: Section 53.9 (Negotiated Procurement[Small Value Procurement] of the Updated 2016 Revised IRR of R.A. 9184)

Date : **May 9, 2024**
Quotation No. : **0769-24**

Company Name

Address

Please quote your best lowest price on the item/s listed below, subject to the Terms and Conditions on this page and submit/return this Request for Quotation (RFQ) duly filled-out and signed by your authorized representative not later than **2:00 PM of May 14, 2024**.

By Authority of the BAC:



ATTY. JOEFFREY D. NAMALATA

City General Services Officer

Terms and Conditions:

1. **Delivery Period shall be within 30 calendar days.**
2. **Warranty shall be for a period of Three (3) months for supplies & materials; one (1) year for equipment, from the date of acceptance by the procuring entity.**
3. **Price Validity shall be for a period of Ninety (90) calendar days.**
4. **The following shall be attached upon submission of the quotation:**
 - 1) **PhilGEPS Registration Number**
 - 2) **Current and valid Mayor's/Business Permit**
 - 3) **Brochures of the product being offered for equipment/ vehicles/electronic devices/ appliances**
 - 4) **Omnibus Sworn Statement (duly notarized), for Approved Budget for the Contract (ABC) above fifty thousand pesos (P50,000.00).**

Item No.	ITEM & DESCRIPTION	BRAND & MODEL	QTY	UNIT	UNIT PRICE
1	Blood gas reagent - test kit, 100's		3	pack	
2	Quality control - test kit, 10's		3	box	
3	Deproteinizer - test kit, for blood gas & electrolytes analyzer 5's		5	bottle	
4	Electrodes - test kit, conditioner 0.8ml, 5's (NOTE: WITH FREE USE OF BRAND NEW RE-AGENT MACHINE)		3	pack	
Total Amount in Words and Figures					

PhilGeps Registration Number : _____

After having carefully read and accepted your Terms and Conditions, I/we quoted you on the item/s at price/s quoted above.

Printed Name / Signature

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

Date