

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

REQUEST FOR QUOTATION

Project Name: Supply and delivery of 2 kits Triglycerides/Test kit 300's and 9 other items; PR 24-0111,dated February 1, 2024

Method of Procurement: Section 53.9 (Negotiated Procurement[Small Value Procurement] of the Updated 2016 Revised IRR of R.A. 9184)


Date : **February 16, 2024**  
Quotation No. : **1038-24**

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 February 21, 2024** .

By Authority of the BAC:



**ATTY. JOEFFREY D. NAMALATA**  
City General Services Officer

Terms and Conditions:

- 1. Delivery Period shall be within **15** 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

Item No.	ITEM & DESCRIPTION	BRAND & MODEL	QTY	UNIT	UNIT PRICE
1	Triglycerides - test kit 300's		2	kit	
2	Direct HDL - test kit 300's		2	kit	
3	Uric Acid - test kit 300's		2	kit	
4	BUN - test kit 300's		2	kit	
5	SGOT/AST - test kit, 300's		2	kit	
6	ALT/SGPT - test kit, 250's		2	kit	
7	Alkaline Phosphatase - test kit 300's		2	kit	
8	Magnesium - test kit 90's		2	kit	
9	Phosphotous - test kit 300's		2	kit	
10	Blood Gas - test kit, Opti CCA Cassette B 25's (NOTE: ITEM 1-10 WITH FREE USE OF BRAND NEW RE-AGENT MACHINES)		1	box	

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