



Republic of the Philippines
PHILIPPINE COCONUT AUTHORITY REGION XIII
Regional Office, 2F South Boulevard Square., South Montilla Blvd., Butuan City

REQUEST FOR QUOTATION

Date: August 22, 2023

Quotation No.: RO- 2023 08 188

Registered Name of Supplier as written in Official Receipt

Business Address of Supplier

Tax Identification Number (TIN); indicate whether VAT or Non-VAT

PhilGEPS Registration Number (required)

Philippine Coconut Authority Region XIII through its Bids and Awards Committee (BAC), intends to procure the Medicines for Medical and Dental Mission at Nasipit, Agusan del Norte on Sept. 11, 2023 in accordance with Sec. 53.9 (Negotiated Procurement - Small Value Procurement) of the Revised IRR of R.A. No. 9184.

Please quote your **best offer** for the item/s described below, subject to the Terms and Conditions provided at the last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than August 28, 2023 at 5:00 PM**. A copy of your latest Mayor's/Business Permit and PhilGEPS Registration may be required to be submitted along with your quotation/proposal.

Open quotations may be submitted manually at the address indicated above or through facsimile at (085)341-4372 or email at regionxiii@pca.gov.ph.


ERNALYN E. COLON

Canvasser


MANOLITO L. CASAPAO

BAC Chairperson

After having carefully read and accepted the Terms and Conditions, I/We submit our quotation/s for the item/s as follows:

TECHNICAL SPECIFICATIONS

1. Please quote your **best offer** for the item/s below. Please do not leave any items blank. Indicate "0" if item being offered is for free.
2. Bidders must state "Comply" or any equivalent term in the column "Bidder's Statement of Compliance" against each of the individual parameters of each Specification.

Item	Description	Total Quantity	Bidder's Statement of Compliance	Unit Price
1	Medicines for Medical and Dental Mission at Nasipit, Agusan del Norte on September 11, 2023 Alcohol 500ml 70%, Isoprophyl 30 AMOXICILLIN 500 mg. CAP 100's 30 AMOXICILLIN 250 mg. CAP 100's 30 ASCORBIC ACID SYR. 100mg 60ml. 20 ASCORBIC ACID DROPS 100MG/ML 15ML 40 SODIUM ASCORBATE/VITAMIN C 500MG 100's 50 AMLODIPINE 10MG 100'S 60 LAGUNDI SYRUP 300MG/5ML 60ML 150 LAGUNDI 300MG TAB 100'S 30 LOPERAMIDE CAP 2MG 100'S 20 MEFENAMIC ACID 250MG CAP 100'S 20 MEFENAMIC ACID 50MG/5ML. SUSP 60ML 40 MEFENAMIC ACID 500MG CAP 100'S 30 VITAMMIN B COMPLEX TAB 100MG 100'S 50 METRONIDAZOLE TAB 500MG 100'S 20 METRONIDAZOLE 125MG/5ML 60ML 20 PARACETAMOL 500MG TAB 100'S 20 PARACETAMOL SYRUP 250MG/5ML 60ML 150 OMEPRazole TAB 40MG 100'S 20 MULTIVITAMINS DROPS 15ML 50 AMOXICILLIN 250MG/5ML SUSP. 60ML 150			

Item	Description	Total Quantity	Bidder's Statement of Compliance	Unit Price
	CAPTROPIL 25mg tab 100's	20		
	MULTIVITAMINS WITH IRON SYRUP 60ML	250		
	COTRIMOXAZOLE 800MG TAB 100'S	20		
	MULTIVITAMINS WITH IRON CAP 100'S	50		
	METFORMIN 500MG 100'S	10		
	CEFALEXIN 500MG CAP 100'S	30		
	CIPROFLOXACIN 500MG TAB 100'S	20		
	LOSARTAN TAB 50MG 100'S	60		
	CETIRIZINE TAB 10MG 100'S	20		
	CETIRIZINE 5MG/ML SOLUTION 60ML	40		
	CETIRIZINE DROPS 15ML	40		
	CELECOXIB 200MG CAP 100'S	20		
	CO-AMOXICLAV 625MG TAB 14'S	20		
	CO-AMOXICLAV 250MG/62.5 PER 5ML 60ML	40		
	DICYCLOVERINE TAB 10MG 100'S	20		
	DECYCLOVERINE 10mg syrup 60ml	20		
	COTTON BALLS 150'S	20		
	ZINC OXIDE + CALAMIN OINTMENT 305G 20'S	20		
	GLOVES MEDIUM	20		
	LIDOCAINE ANESTHESIA HCl + EPINEPRINE 2% CARTRIDGES 50'S	10		
	DENTAL NEEDLES SHORT 100'S	5		
	TRANEXAMIC ACID 500MG CAP 100'S	5		
	TRANEXAMIC ACID 250MG CAP 100'S	5		
	SALBUTAMOL 2MG TAB 100'S	5		
	METROPOLOL 50MG TAB 100'S	5		
	GLICLAZIDE 80MG TAB 100'S	20		
	RANITIDINE HCL TAB 150MG 50'S	5		
	SAMBONG 250 MG TAB 100'S	5		
	PARACETAMOL 100MG DROPS 15ML	30		
	HYPROMELLOSE SOLUTION 7.5ML	100		
	OPHTHALMIC SOLUTION 0.05% x 7.5 mL	100		

SCHEDULE OF REQUIREMENTS

The delivery schedule expressed as weeks/months stipulates hereafter the delivery date to the project site.

Item	Description	Total Quantity	Delivery
1	Medicines for Medical and Dental Mission at Nasipit, Agusan del Norte on September 11, 2023	lot	before September 11, 2023

FINANCIAL OFFER

Item	Quantity	Approved Budget for the Contract	Your Total Offered Quotation
1	lot	₱392,019.80	

TERMS AND CONDITIONS

1. ALL ENTRIES MUST BE HAND WRITTEN/TYPEWRITTEN;
2. SUPPLIERS SHALL PROVIDE CORRECT AND ACCURATE INFORMATION REQUIRED IN THIS FORM;
3. ANY INTERLINEATIONS, ERASURES OR OVERWRITING SHALL BE VALID ONLY IF THEY ARE SIGNED OR INITIALED BY THE SUPPLIER OR THE SUPPLIER'S AUTHORIZED REPRESENTATIVE;
4. PRICE QUOTATION(S) SHALL BE DENOMINATED IN PHILIPPINE PESO AND SHALL BE INCLUSIVE OF TAXES;
5. QUOTATIONS EXCEEDING THE ABC SHALL BE REJECTED INSTANTANEOUSLY;
6. PRICE VALIDITY SHALL BE FOR A PERIOD OF THIRTY (30) CALENDAR DAYS FROM DATE OF SUBMISSION;
7. SUPPLIER SHALL SUBMIT THE FOLLOWING DOCUMENTS PRIOR TO AWARD OR UPON REQUEST:
 - a. BUSINESS PERMIT/BIR REGISTRATION
 - b. LATEST INCOME/BUSINESS TAX RETURN
 - c. PHILGEPS REGISTRATION CERTIFICATE
 - d. NOTARIZED OMNIBUS SWORN STATEMENT
8. PURCHASE ORDER/CONTRACT SHALL BE AWARDED TO THE LOWEST QUOTATION (FOR GOODS AND INFRASTRUCTURE) OR, THE HIGHEST RATED OFFER (FOR CONSULTING SERVICES) WHICH COMPLIES WITH THE MINIMUM TECHNICAL SPECIFICATIONS AND OTHER TERMS AND CONDITIONS STATED HEREIN;
9. IN CASE OF TWO OR MORE BIDDERS ARE DETERMINED TO HAVE SUBMITTED THE LOWEST CALCULATED QUOTATION/LOWEST CALCULATED AND RESPONSIVE QUOTATION, PCA SHALL ADOPT AND EMPLOY "DRAW LOTS" AS THE TIE-BREAKING METHOD TO FINALLY DETERMINE THE SINGLE WINNING PROVIDER IN ACCORDANCE WITH GPPB CIRCULAR 06-2005;
10. PCA SHALL HAVE THE RIGHT TO INSPECT AND/OR TEST THE GOODS TO CONFIRM THEIR CONFORMITY TO THE TECHNICAL SPECIFICATIONS;
11. WARRANTY SHALL BE FOR A PERIOD OF THREE (3) MONTHS FOR SUPPLIES AND MATERIALS, AND ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY THIS OFFICE;
12. **PAYMENT SHALL BE MADE THROUGH MDS CHECK AFTER DELIVERY AND UPON SUBMISSION OF THE REQUIRED SUPPORTING DOCUMENTS (SALES INVOICE OR BILLING STATEMENT) BY THE SUPPLIER. TERMS OF PAYMENT IS WITHIN THIRTY (30) CALENDAR DAYS FROM THE DATE OF ACCEPTANCE; AND**
13. LIQUIDATED DAMAGES EQUIVALENT TO ONE TENTH OF ONE PERCENT OF THE VALUE OF THE GOODS NOT DELIVERED WITHIN THE PRESCRIBED DELIVERY PERIOD SHALL BE IMPOSED PER DAY OF DELAY.

Signature over Printed Name of Supplier or
Supplier's Representative

Telephone/Mobile No.

Date