

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

RFQ No.: 25-0158-NP-SVP

Date: 2025-2-28

"Note: Prospective supplier must be registered at the Philippine Government Electronic Procurement System (PhilGEPS). You may visit the PhilGEPS website at www.philgeps.gov.ph and register for free."

Company Name: _____
 Company Address: _____
 Contact Person: _____
 Contact No.: _____
 Philgeps Reg. No.: _____
 Company TIN: _____

Item No.	Qty	Unit	Purchaser's Specifications	Bidder's Specifications (Please fill out the detailed specifications in the space provided)	Unit Cost	Total Cost
			SUPPLY AND DELIVERY OF:			
	10	box	MEDICINE, Permethrin, 10mg/10ml sachet, 24 sachets/box			
	10	box	MEDICINE, Pyrethrin 2mg, 10ml sachet, 12 sachets/box			
	5	btl	MEDICINE, Hypermellose 0.3% ophthalmic drop; 10ml			
	20	pc	SOAP, SULFUR Soap 2g/100g			
	10	btl	MEDICINE, Hexetidine, MOUTHWASH, 120ml			
	5	tube	MEDICINE, Silver Sulfadiazine, CREAM, 10mg/g			
	15	tube	MEDICINE, Zinc Oxide 200mg, OINTMENT, 30g			
	15	tube	MEDICINE, Ketoconazole, CREAM, 2%/15g			
	10	tube	MEDICINE, Betamethasone Cream, 500mcg/g			
	30	box	MEDICINE, Co-Amoxiclav 500mg/125mg tablet, 14pcs/box			
	30	box	MEDICINE, Carbocisteine, 500mg tablet, 100pcs/box			
	30	box	MEDICINE, Multivitamins + Iron, 500mg tablet, 100pcs/box			
	30	box	MEDICINE, Ascorbic Acid, 500mg tablet, 100pcs/box			
	10	box	MEDICINE, Oral Rehydration Salts, 25 pcs/box			
	30	box	MEDICINE, Mefenamic Acid, 500mg, 100 tablets/box			
	20	pc	MEDICINE, Tetanus Toxoid, 0.5ml ampule			
	7	box	MEDICINE, Iron + Folic Acid 60mg/250mcg tablet, 100pcs/box			
	10	btl	MEDICINE, Salbutamol, SYRUP, 60ML			
	10	btl	MEDICINE, Amoxicilin 100mg/ml Drops; 10ml			

	15	btl	MEDICINE, Amoxicilin 250/5 Syrup; 60ml			
	10	btl	MEDICINE, Cetirizine 2.5mg/ml Drops; 10ml			
	10	btl	MEDICINE, Phenylephrine Drops; 10ml			
	10	btl	MEDICINE, Ambroxol 6m/m/ml Drops; 10ml			
	10	btl	MEDICINE, CEFALEXIN SYRUP 60ml			
	10	btl	MEDICINE, Co-amoxiclav 457/5 Suspension; 60ml			
	3	box	MEDICINE, Clindamycin 300 mg Capsule; 100pcs/box			
	6	btl	MEDICINE, CEFACTOR SUSPENSION 250/5; 60ml			
	5	tube	MEDICINE, Mupirocin Ointment; 10mg			
	10	tube	MEDICINE, Zinc Oxide Ointment; 15mg			
	40	sachet	MEDICINE, Ketoconazole Shampoo; 10ml			
	2	box	MEDICINE, Prednisone 20mg,100pcs/box			
			***** NOTHING FOLLOWS *****			
			Note: -			
			Approved Budget for the Contract			
			(ABC): PhP 100,014.91			

PURPOSE: HFG - SUPPLY AND DELIVERY OF MEDICINE SUPPLIES - 2ND SEMESTER

PR No. 2025-02-0158

IMPORTANT: The winning bidder MUST SIGN the original copy of Purchase Order(P.O.) upon receipt of the P.O. FAILURE to sign the original P.O. means that the bidder is not interested and will be ground for suspension or blacklisting in DSWD's future biddings.

ARNEL V. RADAZA
Procurement Officer

Supplier
Signature over Printed Name

Company Name: _____
 Company Address: _____
 Contact Person: _____
 Contact No.: _____
 Philgeps Reg. No.: _____
 Company TIN: _____

RFQ No. 25-0158-NP-SVP
 Date: 2025-2-28

Sir/Madame

Please quote your government price/s including delivery charges, VAT or other incidental expenses for the goods listed in **Annex A**. Failure to indicate information could be basis for non-compliance. Also, furnish us with descriptive brochures catalogues, literatures and/or samples, if applicable.

If you are the exclusive manufacturer, distributor or agent in the Philippines for goods listed in **Annex A** please attach in your quotation a duly notarized certification to this effect.

As a condition for award, you will be required to submit the following documentary requirements:

- * Accomplished Quotations (for goods or infra)/ Proposal (for consulting)
- * Mayor's Permit
- * PhilGEPS Registration No.
- * PCAB License (for infra)
- * Income/Business Tax Return for Contract with an ABC amounting above Php.500k
- * Notarized Omnibus Sworn Statement for contracts with an ABC amounting to above Php.50,000.00

Note: Submission of PhilGEPS Platinum Certificate of Registration and Membership is acceptable in lieu of the Mayor's Permit and PhilGEPS Reg. No.

Please accomplish and submit this form together with Annex A and all the required documents to DSWD - Procurement Unit, DSWD Field Office 10, Masterson Avenue, Upper Carmen, Cagayan de Oro City or email it to bac.fo10@dswd.gov.ph not later than _____. Quotations submitted to different email address as stated above shall not be considered for evaluation.

5:00PM on
 MAR 07 2025

Very truly Yours,
ARNEL V. RADAZA
 DSWD 10 Procurement Officer

Terms and Conditions:

1. Award shall be made on per: Item Basis Total Quoted Price Lot Basis
2. Quotation validity shall be: 6 months
3. Goods/Services shall be delivered/conducted within: 15-30 CD after date of receipt of PO
4. Place of Delivery: Field Office 10
5. Delivery Term: Cut-off Time for Deliveries during Office Hours
8 AM - 4 PM - Monday to Thursday
8 AM - 12 NN - Friday

For delivery arrangements, please contact the Contract Implementation Unit to confirm the schedule.

Mai2x- 09954312982
 Nadj- 09286163107
 Froilan- 09519204261

6. Terms of Payment: 15-30 CD after date of Final Inspection
 Payment through **LDDAP-ADA (List of Due and Demandable Accounts Payable-Advice to Debit Account)**.
 Account Name: _____ Account Number: _____
 Bank Name: _____

*Note: Non Land Bank of the Philippines accounts shall be charged a service fee.

7. Liquidated Damage/Penalty: *In case of failure to make full delivery within the time specified above, the amount of Liquidated damages shall be at least equal to one-tenth of one percent (0.01) of the cost of the unperformed portion for every day of delay. Once the cumulative amount of Liquidated damages reaches ten (10%) of the amount of the contract, the Procuring Entity may rescind or terminate the contract, without prejudice to other courses of action and remedies available under the circumstances.*
8. For goods, please indicate brand, model and country of origin.
9. In case of discrepancy between unit cost and total cost, unit cost shall prevail.
10. Please indicate Warranty _____
11. In case of a tie, the contract shall be awarded to the supplier or service provider who first submitted its quotation.
12. NOTE: "Prospective supplier must be registered at the Philippines Government Electronic Procurement System (PhilGEPS). You may visit the PhilGEPS website at www.philgeps.gov.ph and register for free".

ARNEL V. RADAZA
 Procurement Officer

 Supplier
 Signature over Printed Name

Republic of the Philippines
Department of Social Worker and Development
Field Office No. 10
Cagayan de Oro City

PROOF OF RECEIPT

Quotation No: 25-0158-NP-SVP

Items:

Purpose: HFG - SUPPLY AND DELIVERY OF MEDICINE SUPPLIES - 2ND SEMESTER

Company Name	Representative	Position/ Designation	Date	Signature

Canvasser