DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

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."

RFQ No.: 24-0947-NP-SVP

Date: 31 Jul 2024

Company Name:	
Company Address:	
Contact Person:	
Contact No.:	
PhilGEPS Reg. No.:	
Company TIN:	
Email Address:	

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:			
	25	box	Co-amoxiclav 625mg tablet			
	25	bot	Co-amoxiclav 457mg			
	15	box	Cefalexin			
	5	box	Prednisone			
	15	box	Salbutamol 2mg Tablet			
	10	box	Salbutamol Nebulizer			
	25	box	Carbocisteine 500mg capsule			
	25	box	Omeprazole 20mg tablet			
	25	box	Almag			
	15	box	Tranexamic Acid			
	25	box	Hyoscine 10mg tablet			
	25	box	Mefenamic Acid 500mg capsule			
	25	box	lbuprofen 200mg capsule			
	15	box	Calcium Carbonate			
	15	box	Diphenhydramine 50mg capsule			
	10	box	Mebendazole			
	15	box	Metronidazole 500mg tablet			
	5	box	Ofloxacin Ear Drops			
	25	Sachet	Permithrine Shampoo			
	15	Sachet	Ketoconazole Shampoo			
	25	tube	Bioderm Ointment			
	15	tube	Mupirocin Ointment			
	5	bot	Doufilm			
	10	box	Mineral Oil for external (unscented)			
	20	box	Ciprofloxacin 509mg tablet			
	25	box	Amoxicillin 599mg capsule			
	25	box	Cefuroxime 500mg tablet			
	25	box	Paracetamol 500mg tablet			
	25	box	Celoxiclab 200mg tablet			
	25	box	Loratadine 10mg tablet			

25	box	Phenylephrine/Chlorpheniramine tablet		
15	bot	Phenylpropanolamine syrup		
25	box	Sambong Tablet		
25	box	Salbutamol Guaifenesin Capsule		
25	box	Aluminum Magnesium tablet		
25	box	Domperodone tablet		
		*******NOTHING FOLLOWS****		
		Approved Budget for the Contract		
		(ABC): PhP 348,385.00		

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Home for Girls-Home for Girls - DRUGS AND MEDICINES - Second Semester 2024 (CMF-SVP)

PR No. <u>2024-07-0947</u>

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 a ground for suspension or blacklisting in DSWD's future biddings.

ARNEL V. RADAZA	
Procurement Officer	Supplier
	Signature over Printed Name

Company Name:			RFQ No. 24-0947-NP-SVP		
Company Address:			Date: 31-Jul-24		
Contact Person:			_		
Contact No. :			_		
Philgeps Reg. No. : Company TIN:			-		
			-		
Email Address:			_		
Sir/Madam:					
			cable taxes, and other incidental expenses for the goods listed in An us with descriptive brochures, catalogues, literatures and/or samples,		
If you are the exclusive manufactertification to this effect.	cturer, distributor or age	nt in the Philippines for the g	oods listed in Annex A please attach in your quotation a duly notarize	ed	
As a condition for award, you	will be required to sub	omit the following documen	ary requirements:		
* Accomplished Quot	tation (for goods or infi	a)/Proposal (for consulting			
* Mayor's Permit			* Income/Bussines Tax Returns for Contract with an ABC amounting above Php. 500k		
* PhilGEPS Registra	tion No.		*Notarized Omnibus Sworn Statement for contracts with an A amounting to above Php. 50,000.00	BC	
* PCAB license (for i					
Note:Submission of PhilGEPS	Platinum Certificate of F	Registration and Membership	is acceptable in lieu of the Mayor's Permit and PhilGEPS Reg. No.		
	nen, Cagayan de Oro Cit	y or email it to bac <u>.fo10@ds</u>	ocuments to DSWD – Procurement Unit, DSWD Field Office 10, wd.gov.ph not later than 5:00 PM on August 5, 2024. Quotations ation.		
			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 working days up	pon receipt of PO			
4. Place of Delivery	DSWD Field Office 10)			
5. Terms of Payment:	15-30 days after the ir	<u>-</u>			
Payment through LDDAP-ADA			to Debit Account).		
Account Nam	e:	•	Account Number:		
Bank Nan					
*Note: Non Land Bank of the	Philippines accounts shall	l be charged a service fee.			
one-tenth of one percent (0.001) of the amount of the contract, the Pr	f the cost of the unperform	ned portion for every day of del	fied above, the amount of the liquidated damages shall be at least equal t ay. Once the cumulative amount of liquidated damages reaches ten (10% hout prejudice to other courses of action and remedies available under th) of	
<i>circumstances.</i> 7. For goods, please indicate brand	model and country of orig	rin			
8. In case of discrepancy between the	•				
9. Please indicate Warranty		1			
10. In case of a tie, the contract sha	all be awarded to the suppli	er or service provider who first	submitted its quotation.		
11. NOTE: "Prospective supplier n www.philgeps.gov.ph and register	-	ilippine Government Electronic	Procurement System (PhilGEPS). You may visit the PhilGEPS website at		
ADMENT AV DOS CONT					
ARNEL V. RADAZA Procurement Officer			Supplier		
i iocurciiciii Officei			Signature over Printed Name		

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

PROOF OF RECEIPT

Quotation No: 24-0947-NP-SVP

Items: Metronidazole 500mg tablet

Purpose: Home for Girls-Home for Girls - DRUGS AND MEDICINES - Second Semester 2024 (CMF-SVP)

Company Name	Representative	Position / Designation	Date	Signature

Canvasser	