DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

"Note: Prospective supplier must be registered at the Philippine Government Electronic Procurement System	RFQ No.: 25-0315-NP-SVP
(PhilGEPS). You may visit the PhilGEPS website at www.philgeps.gov.ph and register for free."	Date: 2025-3-13

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:			
	200	tab	MEDICINE, Phenobarbital, 30mg			
	80	tablet	MEDICINE, Paracetamol, 500mg			
	50	sachet	MEDICINE, Oral Rehydration Salt, Flavored (orange flavor)			
	25	tube	MEDICINE, Zinc Oxide + Calamine, CREAM			
	3	btl	MEDICINE, Tobramycin Dexamethasone, EYE DROPS			
	70	tab	MEDICINE, Risperidone, 2mg			
	50	btl	MEDICINE, Procaterol Hydrochloride, SYRUP, 60ml			
	12	btl	MEDICINE, Procaterol Hydrochloride, SYRUP, 60ml			
	5	tube	MEDICINE, Mupirocin, Ointment			
	5	box	MEDICINE, Ofloxacin, EAR DROPS			
	45	btl	MEDICINE, Ascorbic Acid, DROPS, 30ml			
	50	tablet	MEDICINE, Escitalopram, 10mg			
	50	tablet	MEDICINE, Clonazepam, 2mg			
	11	btl	MEDICINE, Paracetamol, DROPS, 30ml			
	4	btl	MEDICINE, Iron with Buclizine, SYRUP, 120ml			
	10	btl	MEDICINE, Iron, DROPS, 15ml			
	5	unit	MEDICINE, Salmeterol + Fluticasone Propionate, INHALER/PUFF			
	40	sachet	MEDICINE, Protectis, sachet			
	130	tablet	MEDICINE, Baclofen, 10mg			
			****** NOTHING FOLLOWS ******			
			Note: - RSCC Drugs and medicine			

	Approved Budget for the Contract		
	(ABC): PhP 50,054.20		

PURPOSE: for RSCC medical use

PR No. 2025-03-0315

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:		RFQ No.	25-0315-NP-SVP	
Company Address:		Date:	2025-3-13	
Contact Person:		Dute.	2020 0 10	
Contact No.:				
Philgeps Reg. No.:				
<u> </u>				
Company TIN:				
Sir/Madame				
	e/s including delivery charges, VAT or other incedental expe compliance. Also, furnish us with descriptive brochures cata	· ·		
If you are the exclusive manufacture certification to this effect.	er, distributor or agent in the Philippines for goods listed in	Annex A please attach in your quotati	on a duly notarized	
As a condition for award, you wil	ll be required to submit the following documentary rec	quirements:		
* Accomplished Ouotat	ions (for goods or infra)/ Proposal (for consulting)			
	(gg,	* Income/Business Tax Return for Contract with an ABC amounting above Php.500k		
* Mayor's Permit		* Notarized Omnibus Sworn State an ABC amounting to above Php.		
* PhilGEPS Registratio * PCAB License (for inf		•		
Note: Submission of PhilGEPS Plati	num Certificate of Registration and Membership is accepta	ble in lieu of the Mayor's Permit and Pl	hilGEPS Reg. No.	
	form together with Annex A and all the required documents to Oro City or email it to bac.fo10@dswd.gov.ph not later that for evaluation.			
		Very	truly Yours,	
			L V. RADAZA	
		DSWD 10 P	Procurement Officer	
Terms and Conditions:				
Torms and Conditions.				
1. Award shall be made on per:	☑Item Basis ☐Total Quoted Price	□Lot Basis		
2. Quotation validity shall be: 3. Goods/Services shall be	6 Months			
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 o	contact the Contract Implementation Unit to confirm the sch	nedule.		
Mai2x-	09954312982			
Nadj-	09286163107			
Froilan-	09519204261			
6. Terms of Payment:				
Payment through LDDAP-ADA (I Account Name:	List of Due and Demandable Accounts Payable-Advice	to Debit Account). Account Number:		
Bank Name:				
*Note: Non Land Bank of the I	Philippines accounts shall be charged a service fee.			
7 Liquidated Damaga/Danalty, In a	ase of failure to make full delivery within the time spe	sified above the amount of Liquide	stad damages shall be at	
least equal to one-tenth of one p Liquidated damages reaches ten prejudice to other courses of act 3. For goods, please indicate brand,	ercent (0.01) of the cost of the unperformed portion f (10%) of the amount of the contract, the Procuring E ion and remidies available under the circumstances.	for every day of delay. Once the cum	ulative amount of	
	ll be awarded to the supplier or service provider who first s	submitted its quotation.		
	ast be registered at the Philippines Government Electronic I		nay visit the PhilGEPS	
ARNEL V. RADAZA				
Procurement Officer		Supplie	e r	

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

Items:

Purpose: for RSCC medical use

Company Name	Representative	Position/ Designation	Date	Signature

Canvasser	