



Republic of the Philippines
DEPARTMENT OF HEALTH
Regional Office XI
Southern Philippines Medical Center
J.P. Laurel Avenue, Davao City
Tel. No. 227-2731; Fax No. 221-7029



Request for Quotation

Company Name : _____
Address : _____
TIN Number : _____

Date : March 26, 2019
Quotation No. : 2019-04-158

Please quote your lowest price on the item/s listed below, subject to the General Conditions of the Bids & Awards Committee stating the shortest time of delivery & submit your quotation duly signed by your representative not later than

Monday, 1 April 2019

Terms & Conditions:

1. As a government agency, SPMC shall deal only with legitimate supplier/contractor which issue BIR-registered O.R.s;
2. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties and/or levies payable;
3. All quotations shall be firm and valid for a period at least thirty (30) days from the date of receipt of quotation;
4. SPMC reserves the right to post-qualify any supplier and/or to reject any or all submitted quotations;
5. P.O./Contract shall be awarded to the lowest evaluated responsive bid, delivered items are subject to inspection, with payment processing to commence only after acceptance by the Property Section; and
6. Warranty shall be for a six (6) months for supplies & materials, one (1) year for equipment from date of acceptance by the procuring entity.

Additional Requirements for Submission:

Business Permit / Mayor's Permit
Certificate of Philgeps Registration and Membership
Bureau of Internal Revenue (BIR) Registration
Omnibus Sworn Statement (Using the prescribed form)

License to Operate (for Medical, Laboratory, Drugs & Medicines only)
Certificate of Product Registration (for Medical, Laboratory, Drugs & Medicines only)
DTI / SEC Registration Certificate
Valid PCAB License and Registration (for Infrastructure Projects)

Item No.	Unit	Item Description	ABC Amount	Quantity	Unit Price	Remarks
1	pc	680 Black, INK TONER for HP Deskjet Ink Advantage 3835	510.00	9		
2	pc	680 Tri-color, INK TONER for HP Deskjet Ink Advantage 3835	510.00	9		
3	cart	TN-2280 Brother Toner	3,375.00	5		
4	pc	TN-3448, compatible to MFC-L5900W-Brother printer	5,700.00	6		
5	pc	DR 3455, compatible to MFC-L5900W-Brother printer	7,800.00	4		
6	box	Continuous paper 5x5 for Rx, 2000s/box	950.00	200		
7	cart	Ink, printer HP 955-BLACK, brand new, Original, 0.09kg package weight	1,795.00	15		
8	cart	Ink, printer HP 955-CYAN, brand new, Original, 0.05kg package weight	1,495.00	15		
9	cart	Ink, printer HP 955-YELLOW, brand new, Original, 0.05kg package weight	1,495.00	15		
10	cart	Ink, printer HP 955-MAGENTA, brand new, Original, 0.05kg package weight	1,495.00	15		
11	cart	905XL Colored (MAGENTA), printer jet ink	995.00	2		
12	cart	905XL Colored (CYAN), printer jet ink	995.00	2		
13	cart	905XL Colored (YELLOW), printer jet ink	995.00	2		
14	cart	905XL/909XL BLACK, printer jet ink	2,295.00	2		
Office/Section: IT RESEARCH, NEWBORN SCREENING CENTER MINDANAO, OPD ADMIN, PDPU, NPT, Auditing office purpose: #1-2: for IT research, #3: for NBSCM, #4-5: for PDPU use, #6: for OPD use, #7-10: NPT use, #11-14: for office use						

After having carefully read and accepted your General Conditions. I/We quote you on the item at prices noted above.

email: spmc.procurement@gmail.com
fax: (082) 282-0316
website:
<http://spmc.doh.gov.ph/opportunities/procurement/request-for-quotation>

Signature Over Printed Name

Telephone / Cellphone Nos.

Date