



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 : _____ Date : December 16, 2016
Address : _____ Quotation No. 2016-12-0814
TIN Number : _____

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 **Tuesday, 20 December 2016** in the return envelope attached herewith:

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 |
|----------|------|---|------------|----------|------------|---------|
| | | Catering Services For the participants in the various seminars, workshops and meetings to be conducted for the months of January, February & March 2017. Venues and listings of numbers of participants will be provided upon the request of the facilitators. | | | | |
| 1 | pack | Lunch Inclusion in the menu: 1 Rice, 2 viands (beef, chicken, fish); dessert; softdrink | 170.00 | 1 | | |
| 1 | pack | Snacks Inclusion in the menu: 2 snacks; 1 softdrink | 75.00 | 1 | | |
| | | Office/Section: Procurement Section | | | | |

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

Signature Over Printed Name

Telephone / Cellphone Nos.

Date