PGH Form No. Q-250003 Rev.01; Eff 01 Jul 2021



PHILIPPINE GENERAL HOSPITAL

The National University Hospital University of the Philippines Manila <u>PURCHASING OFFICE</u> Taft Avenue, Manila

PHIC-Accredited Health Care Provider
ISO 9001 Certified

REQUEST FOR QUOTATION / PROPOSAL

Purch	8 September 2021 ase Request No.:PUR21-08-0757 of Procurement:NEGOTIATED Pl				e Procure	<u>ment</u>		
	8							
subm	e quote at your government price it your quotation duly signed by pine General Hospital, Taft Avenu	your	repres	entative at the	BAC 1 Se	cretaria	at Office	
1.	ral Conditions: all entries must be typewritten or delivery Period: Seven (7) calendary Varranty shall be for a minimum prome the date of acceptance by the didders must indicate the BRAND arrice validity shall be for a period of commentary requirements should valid Business / Mayor's Pelevalid Business / Income Toupplier is required to submit singularitied. The characteristic information, you may call at the characteristic information, you may call at the characteristic information. The characteristic information of the characteristic information of the characteristic information. The characteristic information of the characteristic information of the characteristic information. The characteristic information of the characteristic information of the characteristic information. The characteristic information of the characteristic information of the characteristic information. The characteristic information of the characteristic information of the characteristic information. The characteristic information of the characteristic information of the characteristic information. The characteristic information of the characteristic information	ar days beriod procus and Mo of 90 co d be atte ermit ax Retu gle bio co fitem	of six (or six	tity. IUMBER offered days from the upon submissio PhilGEPS Notarized r only for each	when app date of ope n of the qu Registratio Omnibus S item. Two may be re	ropriate ening of o otation , n Numbe Sworn Ste o or mor equired. r Mr/Ms	quotation / proposa er/Certifi atement re bids /	n/proposal. al. <i>cate</i> offer is automatically
Item No.	Item Description	Qty	иом	Unit Price (PHP)	Quoted Unit	Statem	ent of	Remarks (Brand and
	PUR21-08-0757 Supply and Delivery of Various Chemicals & Reagents for MRL Microbiology (please refer to Annex "A" PUR21-08-0800 Supply and Delivery of Various Chemicals & Reagents for MRL Hematology (please refer to Annex "B"			Var more y	Price	Yes	No	specifications)
Total A	Approved Budget for the mount of Quotation (in Words& in Fig		tract	197,405.00				
Name (/We, the undersigned Supplier, of Company: of Representative: n / Designation:	hereb	y OFFE	ER to supply/de	eliver/per	form the	e above (described items.

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PHILIPPINE GENERAL HOSPITAL

The National University Hospital
University of the Philippines Manila

PURCHASING OFFICE

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TERMS AND CONDITIONS:

- 1. Bidders shall provide correct and accurate information required in this form.
- 2. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties and/or levies payable.
- 3. Quotations exceeding the Approved Budget for the Contract shall be rejected.
- 4. Award of contract shall be made to the lowest quotation (for goods and infrastructure) or, the highest rated offer (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
- 5. Any interlineations, erasures or overwriting shall be valid only if they are signed or initialed by you or any of your authorized representative/s.
- 6. The item/s shall be delivered according to the requirements specified in the Technical Specifications.
- 7. The UPM-PGH shall have the right to inspect and/or test the goods to confirm their conformity to the technical specifications.
- 8. The UPM-PGH shall assumes no responsibility whatsoever to compensate or indemnify any supplier for expenses incurred in the preparation of Quotations/Proposals.
- In case of two or more bidders are determined and declared as Lowest Calculated and Responsive Quotation, the UPM-PGH shall adopt and employ "draw lots" as the tie-breaking method to finally determine the winning provider in accordance with GPPB Circular 06-2005.
- 10. If the AWARDEE fails to effect delivery with the prescribed period, the UPM-PGH may upon its discretion, extend delivery period of subject, however, to the imposition of appropriate liquidated damages, the amount of which 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, collectible from any money due or maybe due to the supplier/contractor. Once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, the UPM-PGH may rescind or terminate the contract, without prejudice to other courses of action and remedies open to it. If the AWARDEE, however, fails to effect completed delivery within the extended period, the UPM-PGH shall have the right to cancel said contract and shall constitute a ground for disqualification of the AWARDEE from future biddings, without prejudice to the imposition of other sanctions provided for under 2016 Revised IRR.
- 11. The UPM-PGH reserves the rights to reject any or all bids or not award the contract, to waive any formality or defect therein and to accept any or all offers that may be considered most advantageous to the Government.
- 12. Compliance with Republic Act (R.A.) 9184 and other applicable laws.

	UNDERTAKING
I/We undertake, if our quotation/propo General /Terms and Conditions contained	sal is accepted, to deliver the items in accordance with the in the Request for Quotation/Proposal.
Name of Company: Address: Name of Representative: Position / Designation:	Office Tel. No.: Fax / Mobile No.: e-Mail Address: Date:
Signature	



End-User: <u>Department of Medicine (MRL Microbiology)</u> PR No.: <u>PUR21-08-0757</u>

				io.: <u>PURZ1-08-</u>		1 20 500		
Item	ltem Description		иом	Unit Price	Quoted	Statement of Compliance		Remarks
No.	rem bescription	Qty		(Php)	Unit Price	Yes	No	(brand and specifications)
1	Antibiotic discs	6	cart	250.00				
	Amikacin 30ug							
	50discs/cart							
2	Antibiotic discs	2	cart	250.00				
	Ampicillin 10ug							
Vasi	50discs/cart							
3	Antibiotic discs	4	cart	250.00				
	Ampicillin/Sulbactam 10/10ug							
4	50discs/cart						-	
4	Antibiotic discs	6	cart	250.00				
	Amoxicillin/Clavulanic acid 20/10ug							
5	50discs/cart Antibiotic discs	2	cart	250.00				
J	Azithromycin 15ug	4	care	250.00				
	50discs/cart							
6	Antibiotic discs	2	cart	1,100.00				
	Bacitracin 0.04 IU (Taxo A)	_		1,100.00				
	50discs/cart							
7	Antibiotic discs	2	cart	250.00				
	Cefefime 30ug							
	50discs/cart							
8	Antibiotic discs	3	cart	1,500.00				
	Cefinase			1000-01-0000000000000000000000000000000				
	50discs/cart							
9	Antibiotic discs	6	cart	250.00				
	Cefoxitin 30ug							
	50discs/cart							
10	Antibiotic discs	10	cart	250.00				
	Ceftazidime 30ug							
	50discs/cart							
11	Antibiotic discs	3	cart	250.00				
	Ceftriaxone 30ug							
	50discs/cart							
12	Antibiotic discs	3	cart	250.00				
	Cefuroxime 30ug							
10	50discs/cart	2	NAMES OF THE PARTY	0.50.00				
13	Antibiotic discs	2	cart	250.00				
	Chloramphenicol 30ug							
14	50discs/cart Antibiotic discs,	8	cast	250.00				
	Ciprofloxacin 5ug	0	cart	250.00				
	50discs/cart							
15	Antibiotic discs	2	cart	250.00				
	Clindamycin 2ug,		5,000,00	250.00				
	50discs/cart			540:				
16	Antibiotic discs	1	cart	250.00				
	Colistin 10ug							
	50discs/cart							
17	Antibiotic discs	4	cart	250.00				
	Erythromycin 15ug							
	50discs/cart							
18	Antibiotic discs	2	cart	250.00				
	Ertapenem 10ug							
	50discs/cart							
19	Antibiotic discs	6	cart	250.00				
	Gentamicin 10ug							
	50discs/cart				_			
20	Antibiotic discs	2	cart	250.00				
	Imipenem 10ug							
	50discs/cart							

End-User: <u>Department of Medicine (MRL Microbiology)</u> PR No.: <u>PUR21-08-0757</u>

em	Item Description	Qty	UOM	Unit Price	Quoted	Statem: Compli	SECURITY SECURITY	Remarks
Vo.	item bescription	Qty	OOM	(Php)	Unit Price	Yes	No	(brand and specifications)
21	Antibiotic discs	6	cart	250.00				
	Levofloxacin 5ug							
	50discs/cart							
22	Antibiotic discs	6	cart	250.00				
	Linezolid 30ug							
	50discs/cart							
23	Antibiotic discs	1	cart	250.00				
	Minocycline 30ug							
	50discs/cart							
24	Antibiotic discs	6	cart	250.00				
	Meropenem 10ug							
	50discs/cart							
25	Antibiotic discs	2	cart	250.00				
	Nitrofurantoin 300ug	_		250.00			- 1	
	50discs/cart							
26	Antibiotic discs	1	cart	250.00			-+	
-outal	Noboviocin 5ug	1	Curt	250.00				
	50discs/cart							
27	Antibiotic discs	3	cart	250.00				
-/	HAVOONALO VARONINA ARTO HAVO ARTO HAVO	3	tari	250.00				
	Optochin							
28	50discs/cart	4		250.00				
20	Antibiotic discs	4	cart	250.00				
	Oxacillin 1ug							
20	50discs/cart	1		25222		\vdash	\rightarrow	
29	Antibiotic discs	4	cart	250.00				
	Penicillin 10U							
	50discs/cart					\vdash		···
30	Antibiotic discs	4	cart	250.00				
	Piperacillin Tazobactam							
	100/10ug							
31	Antibiotic discs	1	cart	250.00				
	Polymixin-B							
	50discs/cart			9				
32	Antibiotic discs	2	cart	250.00				
	Tetracycline 30ug							
	50discs/cart							
33	Antibiotic discs	10	cart	250.00				
	Trimethoprim / Sulfamethoxazole							
	50discs/cart							
34	Antibiotic discs	2	cart	250.00				
	Vancomycin							
	30ug/cart							
	Nothing Follows							
								
	Approved Budget for the Contract	;		37,450.00				Wasanin and American State of the Control of the Co
	mount of Quotation (in Words & in Figures)			Forest Productive Co. (1997)				

	I/We, the undersigned Supplier, hereby OFFER to supply/delivery/perform the above described items.
Name of Company:	
Name of Representative:	
Position/Designation:	
Signature:	

End-User: <u>Department of Medicine (MRL Hematology)</u> PR No.: <u>PUR21-08-0800</u>

Item No.	Item Description	Qty	иом	Unit Price	Quoted Unit Price		nent of liance	Remarks (brand and specifications)
140.				(Php)	omt Price	Yes	No	(блана ана ѕресілісайонія)
1	Factor VIII Def Plasma	6	бох	14,000.00				
2	Lupus Anticoagulant(LA 1) 2ml x 10	2	бох	13,800.00				
3	Lupus Anticoagulant(LA 2) 2ml x 10	2	бох	10,000.00				
4	Owrens Veronal Buffer(diluent) 15ml x 10	1	бох	3,500.00				
5	Actin FSL 10 x 2ml	1	бох	7,000.00				
6	Factor IX Def Plasma	1	бох	11,500.00				
7	Standard Human Plasma(Calibrator)	1	бох	6,355.00				
	1ml x 10 **Nothing Follows**	-						
	Nothing Follows							
				2 0 0,				
				=				
				11 1 2 2 2 1 1 1				
					_			
	Approved Budget for the Contract			159,955.00				
Total A	mount of Quotation (in <u>Words</u> & in <u>Figures</u>)						1	
:===:	I/We, the undersigned Suppli							
	f Company: f Representative:					3.50		
	n/Designation:							
Signatu	re:							

