



Republic of the Philippines
Province of Pampanga
Bids and Awards Committee
Provincial Capitol, City of San Fernando, (P) / (045) 435-5901

JUL 18 2024

RFQ No. **240566 (Reposting)**
P.R. No. / Date / End User / Purpose:
(24-3190 5/28/2024 PHO Psychiatric Medicines for Alagang Nanay Preventive Health Care Program)

REQUEST FOR QUOTATION
Small Value Procurement

Company Name: _____
Address: _____
Tel. No.: _____

Please quote your lowest price for the requirements listed hereunder subject to the Terms and Conditions stated below and submit to this Office duly signed by you or your representative not later than **4:00 p.m. JUL: 23 2024**

<p>APPROVED BUDGET FOR THE CONTRACT (ABC): Php 983,231.00</p>	<p>FRANCIS V. MASLOG VICE-CHAIRPERSON <i>Francis</i> Bids and Awards Committee</p>
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TERMS AND CONDITIONS

- All quotations may be typewritten or handwritten, placed in a sealed envelope.
- All quotations shall be valid for one hundred twenty (120) calendar days from the deadline of the submission of the same.
- Any erasures or overwriting shall be valid only if they are signed or initialed by the supplier or its authorized representative.
- Interested suppliers are required to submit their valid current Mayor's Permit, PhilGEPS Registration Number, and Income/BIR Tax Return (for ABCs above P500,000.00) upon submission of quotation. In lieu of the Mayor's Permit and PhilGEPS Registration Number, the PhilGEPS Certificate of Platinum Membership may be submitted. For new businesses, submit the BIR Certificate of Registration and latest quarterly return or percentage tax..
- The applicable rate for late deliveries is one tenth (1/10) of one percent (1%) of the cost of the unperformed portion for every day of delay.
- The Provincial Government of Pampanga reserves the right to accept or reject any quotation, and to annul the procurement process and reject all quotations at any time prior to contract award, without thereby incurring any liability to the affected supplier/s.
- The PGP also reserves the right to waive any required formality in the proposals received, and select the proposal which it determine to be the most advantageous to the government.

Item No.	Qty	Unit	Item Description	Unit Price	Total Price
1	200	tab	Aripazole 5mg		
2	3800	tab	Biperiden 2mg		
3	200	tab	Carbamazepine 200mg		
4	500	tab	Chlorpromazine 100mg		
5	5500	tab	Clozapine 100mg		
6	1500	tab	Escitalopram 10mg		
7	300	tab	Lamotrigine 100mg		
8	1200	tab	Levetiracetam 500mg		
9	400	tab	Levomepromazine 25mg		
10	200	tab	Lithium carbonate 450mg		
11	500	tab	Memantine 10mg		

			<u>Item Description</u>	<u>Unit Price</u>	<u>Total Price</u>
12	2800	tab	Olanzapine 10mg		
13	500	tab	Quetiapine 25mg		
14	5600	tab	Risperidone 2mg		
15	200	tab	Sertraline 50mg		
16	5700	tab	Sodium valproate 250mg		
			<p>TERMS OF REFERENCE:</p> <p>1. License to Operate as Drug Manufacturer/Distributor/Trader Issued by the FDA to be submitted together with the quotation.</p> <p>2. Must submit Certificate of Product Registration for all items from FDA together with the quotation.</p> <p>3. Must submit Certificate of Dealership/Sub Dealership/Distributor/Sub Distributor for all items together with the quotation.</p> <p>4. Brand of the items being offered must be indicated in the quotation.</p> <p>5. The procuring entity reserves the right to conduct product testing/inspection if necessary to determine the fitness of the item/s being offered by prospective supplier/s.</p>		
			<p>AFTER SALES SERVICE:</p> <p>1. Expiration period must be at least eighteen (18) months from the date of delivery.</p> <p>2. Replacement of defective items/packaging within 24 hours upon notification by the end user.</p>		
			<p>SCHEDULE OF REQUIREMENT:</p> <p>1. Progressive delivery and billing.</p> <p>2. Schedule and quantity of delivery subject to at least two (2) days upon notification by the end user.</p>		
Total Lot Price					
<p>Note: The winning supplier shall submit a duly signed and notarized Omnibus Sworn Statement prior to notice of award.</p>					

THE BIDS AWARDS COMMITTEE:

Having carefully read and accepted your Terms and Conditions, including the technical specifications, I/We offer to supply/deliver the item/s as noted above.

 Supplier's authorized representative signature over printed name
 Designation: _____
 Contact No.: _____
 Email Address.: _____

 BAC CANVASSER

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