

Republic of the Philippines  
City of Manila  
CITY GENERAL SERVICES OFFICE  
**REQUEST FOR PRICE QUOTATION**  
**NP-Small Value Procurement**

Date: April 12, 2018  
Quotation No.2018-04-194

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_

Please quote your lowest price on the item/s listed below and submit your quotation together with the requirements stated hereunder to this office located at Room 442, Manila City Hall Building, Arroceros Street, Manila during office hours within seven (7) calendar days from receipt hereof, subject to the following terms and conditions, to wit:

1. Delivery period shall be within fifteen (15) calendar days upon receipt of Notice to Proceed.
2. Warranty shall be for a period of three (3) months for supplies and materials, One (1) year for equipment from date of acceptance by the end-user.
3. Price validity shall be for a maximum period of 120 calendar days.
4. Subject to the submission of the following documents:
  - a. DTI Certificate of Registration
  - b. Mayor's/Business Permit
  - c. PhilGEPS Registration Number
  - d. Income/Business Tax Return
  - e. Omnibus Sworn Statement

Canvassed By:

**FRANCIS F. YENKO**  
Officer-In-Charge

**DUANNIE C. GONZALES**  
Acting Supply Officer I

ITEM	QTY.	UNIT	ARTICLE AND DESCRIPTION	CEILING PRICE	UNIT PRICE	TOTAL
Office: Ospital Ng Maynila Medical Center				PR No. 10		
Charge to: Philhealth Trust Fund						
ABC: Php893,706.00						
<u>Various Supplies for Cataract Procedure</u>						
1	25	vials	Lidocaine 2% vial 1:4	Php 97.00	Php _____	Php _____
2	50	vials	Bupivacane heavy amp. 1:2	Php 995.00	Php _____	Php _____
3	10	btls.	Proparacaine Eye Solution 1:10	Php 1,243.00	Php _____	Php _____
4	25	vials	Hydinase 1:4	Php 500.00	Php _____	Php _____
5	33	vials	Typhan Blue vial 1:3	Php 275.00	Php _____	Php _____
6	33	vials	Carbachol vial 1:3	Php 602.00	Php _____	Php _____
7	100	bxs.	Cohesive Viscoelastic gel	Php 2,900.00	Php _____	Php _____
8	100	pcs.	Intraocular lens, rigid/foldable	Php 1,900.00	Php _____	Php _____
9	50	pcs.	Knife, 2.75 mm 1:2	Php 660.00	Php _____	Php _____
10	50	pcs.	Dispersive viscoelastic gel 1:2	Php 275.00	Php _____	Php _____
11	50	pcs.	Stab knife, 15 degrees 1:2	Php 495.00	Php _____	Php _____
12	50	pcs.	Nylon, 10-0 1:2	Php 453.20	Php _____	Php _____
13	25	btls.	Tropicamide + Phenyleprine Eye Solution 1:4	Php 1,064.00	Php _____	Php _____
14	25	btls.	Moxifloxacin Eye Solution 1:4	Php 786.00	Php _____	Php _____
15	100	btls.	Levofloxacin Eye Solution	Php 480.00	Php _____	Php _____
16	50	btls.	Nepafenac Eye Solution 1:2	Php 899.00	Php _____	Php _____
17	100	btls.	Prednisolone Acetate E/S	Php 545.00	Php _____	Php _____
18	100	btls.	Sodium Chloride Eye Solution	Php 198.00	Php _____	Php _____
x-x-x-x-x-x-x-x-x-x-x-x						
				Per Lot Basis Total . . . . .	Php _____	Php _____

After having carefully read and accepted your terms and conditions, I/We hereby quote on the items/s at prices listed above

\_\_\_\_\_  
Printed Name/Signature

\_\_\_\_\_  
Tel. No/Cellphone No.  
e-mail address

\_\_\_\_\_  
Date