

CITY GENERAL SERVICES OFFICE

REQUEST FOR PRICE QUOTATION (RFQ) No. 2021-06-389

NP-Small Value Procurement

June 28, 2021

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. If applicable, indicate the specific brand, model/year and country of origin for each item.
2. Delivery period shall be within ninety (90) calendar days upon receipt of Purchase Order
3. 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.
4. Price validity shall be for a maximum period of 120 calendar days.
5. 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:

THELMA L. PEREZ  
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 Charge to: Philhealth Trust Fund ABC: Php450,000.00	PR No. 040		
1	1	unit	Accessories for Laparoscopy System Spare Bulb xenon 300 watts with heat sink complete	Php 440,000.00	Php _____	Php _____
2	1	unit	Spare bulb 250 watts halogen x-x-x-x-x-x-x-x-x-x	Php 10,000.00	Php _____	Php _____
				Per Lot Basis Total . . . .	Php _____	Php _____

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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