



OFFICE OF THE BIDS AND AWARDS COMMITTEE

Name of Project : **Supply and Delivery of Anti-Rabies Vaccine and Medical Supplies to be used for the Rabies Prevention and Control Program in the City of San Fernando, Pampanga**

Location of the Project : **City Health Office**

REQUEST FOR QUOTATION
(FM-CSFP-CGSO-39; Revision No. 01;06/23/14)

Date : **October 30, 2017**

Quotation No. : **D2-17-0644**

 Company Name

 Address

Please quote your lowest price on the item/s listed below and submit your quotation duly signed by your representative not later than **November 07, 2017 at 10:00 A.M.** at **CGSO Building, New Public Market, City of San Fernando, Pampanga.**

Canvassed by:

Approved by:

JOSEPHINE S. BULANADI
 Administrative Assistant III

ENGR. MICHAEL N. QUIZON, JR.
 BAC Chairman

- NOTE:
1. ALL ENTRIES MUST BE READABLE
 2. DELIVERY PERIOD WITHIN _____ CALENDAR DAYS
 3. WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPPLIES & MATERIALS, ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY THE PROCURING ENTITY
 4. PRICE VALIDITY SHALL BE FOR A PERIOD OF SIXTY (60) CALENDAR DAYS

ITEM NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL
1	450	vial(s)	Purified Chick Embryo preferably RABIPUR		
2	124	vial(s)	Purified Vero Cell Vaccine		
3	10	bx(s)	1cc Syringe preferably Cos med		
4	5	btl(s)	Sterile Water 50ml		
5	5	btl(s)	Alcohol, 500ml		
6	3	roll(s)	Cotton 400gms		
			xxxxxx Nothing follows xxxxxx		
			TOTAL AMOUNT		P

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

 Printed Name / Signature

 Tel No. / Cellphone No.

 Date