



Republic of the Philippines
PROVINCE OF DAVAO DEL SUR
Rm. 4 Executive Building, Barangay Matti, Digos City
Mobile Nos. 0905-229-0526 (Globe) / 0908-332-2024 (Smart)
Telefax: (082) 553-9579 / Website: www.davaodelsur.gov.ph
Email Add.: bac.davaodelsur2@gmail.com

PGO - BIDS AND AWARDS COMMITTEE (BAC)

NEGOTIATED PROCUREMENT – TWO FAILED BIDDING

Date: April 13, 2022

1. The Provincial Government of Davao del Sur, through its Bids and Awards Committee (BAC), invites all suppliers to apply to bid for the following goods:

Office	IB No.	Description	ABC	Sources	Delivery Schedule
PHO	G-209-22	Supply/Delivery of Drugs and Medicines (rebid: lot 2)	₱ 1,415,625.00	General Fund	7 working days

2. Bidding/Negotiation is restricted to Filipino citizens/sole proprietorships, partnerships, or organizations with at least sixty percent (60%) interest or outstanding capital stock belonging to citizens of the Philippines, and to citizens or organizations of a country the laws and regulations of which grant similar rights or privileges to Filipino citizens, pursuant to RA 5183 and subject to Commonwealth Act 138.
3. Bidders should be a Platinum PhilGEPS registered.
4. Interested bidders may obtain further information from the Provincial Government of Davao del Sur at the address given below from **8:00 am-4:00 pm, Mondays to Fridays**.

The BAC Chairperson

Provincial Government of Davao del Sur
Email: bac.davaodelsur2@gmail.com

MS. NORJANNA M. CAMAGUIN, MPA

Head BAC Secretariat
Office of the BAC Secretariat
Room 4, Executive Building, Barangay Matti, Digos City
Website: www.davaodelsur.gov.ph
Email: bac.davaodelsur2@gmail.com
Telephone No.: (082) 553-9579
Mobile Nos.:
Globe 0905-229-0526
Smart 0908-332-2024

5. Negotiation shall be on **April 21, 2022 at 10:00 am, via Google Meet Application through this link: meet.google.com/ajm-bjbx-ujd**.
6. The Provincial Government of Davao del Sur, reserves the right to accept or reject any bid, to annul the bidding process, and to reject all bids at any time prior to contract award, without thereby incurring any liability to the affected bidder or bidders.

RAUL D. RAUT, ENP
(PGDH-HRMO)
BAC Chairperson

BY AUTHORITY OF THE BAC CHAIRPERSON:

MS. NORJANNA M. CAMAGUIN, MPA
Head BAC Secretariat
Office of the BAC Secretariat



Republic of the Philippines
PROVINCE OF DAVAO DEL SUR
Matti, Digos City

BIDS AND AWARDS COMMITTEE'
CANVASS/REQUEST FOR QUOTATION

Negotiated Procurement - After 2 Failed Biddings (Sec 53.1)

April 13, 2022

(Company Name & Address)

Sir/madam:

Please quote your price on items listed below, subject to General Conditions at the back of this page, stating the shortest time of delivery and submit your quotation at Room 4, Capitol Building, Matti, Digos City not later than April 21, 2022 @ 9:00 AM. Late submission of quotation shall not be accepted. Thank you.

Request for Quotation's opening shall be on April 21, 2022 @ 10:00 AM via Google Meet Application through this link: meet.google.com/ajm-bjbx-yjd. Request for Quotations will be opened in the presence of the Bidders who choose to attend. Thank you.

Enp. RAUL D. RAUT

PGDH-HRMO / BAC CHAIRPERSON

PR. NO.: 0306-CB-22

End User:

NORIANNA M. CAMAGUIN, MPA
100-IV/Head-BAC Secretariat

Dated: 02/17/2022

PHO

Item No.	Unit	Item and Description	Qty	Approved Budget for Contract (ABC) Total	Approved Budget for Contract (ABC) Unit	Supplier's Quotation Unit Price	Brand Name
		LOT 2 ORALS					
2.1	TAB	ACETAZOLAMIDE 250mg tab	200	4,000.00	20.00		
2.2	SACHET	ACETYLCYSTEINE 200mg powder sachet	1000	10,000.00	10.00		
2.3	TAB	ACETYLCYSTEINE 600mg EFFERVESCENT tab	3000	60,720.00	20.24		
2.4	TAB	ACICLOVIR 400mg tab	300	5,400.00	18.00		
2.5	TAB	ALLOPURINOL 100mg tab	500	1,250.00	2.50		
2.6	TAB	ALLOPURINOL 300mg tab	500	2,500.00	5.00		
2.7	TAB	ALUMINUM + MAGNESIUM HYDROXIDE 200mg+100mg tab	1000	1,500.00	1.50		
2.8	BOT	ALUMINUM + MAGNESIUM HYDROXIDE SUSP. 225mg+200mg/5ml 60ml bot	72	1,620.00	22.50		
2.9	TAB	AMIODARONE 200mg tab	300	5,400.00	18.00		
2.10	TAB	AMLODIPINE BESILATE 10mg tab	5000	17,500.00	3.50		
2.11	TAB	AMLODIPINE BESILATE 5mg tab	3000	6,000.00	2.00		
2.12	CAP	AMOXICILLIN TRIHYDRATE 250mg cap	1000	2,250.00	2.25		
2.13	BOT	ASCORBIC ACID 100mg/5ml, 60ml syrup bot.	144	5,040.00	35.00		
2.14	TAB	ASCORBIC ACID 500mg tab	10000	40,000.00	4.00		
2.15	TAB	ASPIRIN 80mg tab	1000	3,500.00	3.50		
2.16	TAB	ATENOLOL 100mg tab	600	1,800.00	3.00		
2.17	TAB	ATENOLOL 50mg tab	600	2,700.00	4.50		
2.18	TAB	ATORVASTATIN CALCIUM 40mg tab	1000	10,000.00	10.00		
2.19	TAB	ATORVASTATIN CALCIUM 80mg tab	500	8,500.00	17.00		
2.20	TAB	AZITHROMYCIN 500mg tab	3000	105,000.00	35.00		
2.21	TAB	BETAHISTINE HCl 16mg Tab	300	7,500.00	25.00		
2.22	TAB	BETAHISTINE HCl 24mg Tab	300	10,500.00	35.00		
2.23	TAB	BETAHISTINE 8mg Tab	300	3,000.00	10.00		
2.24	TUBE	BETAMETHASONE DIPROPIONATE CREAM 0.1% 5g tube	24	2,400.00	100.00		
2.25	TUBE	BETAMETHASONE DIPROPIONATE OINTMENT 0.1% 5g tube	24	1,080.00	45.00		
2.26	TAB	BISACODYL 5mg tab	500	2,500.00	5.00		
2.27	SUPP	BISACODYL ADULT 10mg suppository	100	5,500.00	55.00		
2.28	SUPP	BISACODYL PEDIATRIC 5mg suppository	100	1,500.00	15.00		
2.29	TAB	BISOPROLOL FUMARATE 5mg tab	300	5,400.00	18.00		
2.30	NEB	BUDESONIDE 250mcg/ml, 2ml (unit dose)	300	16,500.00	55.00		
2.31	TAB	BUTAMIRATE CITRATE 50mg MR tab	1500	19,500.00	13.00		
2.32	BOT	BUTAMIRATE CITRATE 7.5mg/5ml 120ml syrup	144	17,280.00	120.00		
2.33	TAB	CALCIUM CARBONATE 500mg tab	3500	28,000.00	8.00		
2.34	TAB	CAPTOPRIL 25mg tab	1000	2,500.00	2.50		
2.35	TAB	CARVEDILOL 25mg tab	300	1,500.00	5.00		
2.36	TAB	CARVEDILOL 6.25mg tab	1000	4,500.00	4.50		

Note: In case of tie quotation between suppliers, the BAC is hereby authorized to do the toss coins/draw lots.

ITR/BTR and Omnibus sworn statement shall be submitted prior to the release of payment in the case of Small Value Procurement.

After having carefully read and accepted your General Conditions at the back, I/We have quote you on the item/s at prices noted

(Name & Signature or proprietor or its duly authorized representative)

CANVASSER:

Valid ID

Name & Signature of Canvasser

(Telephone, Cellphone No. Or Email Address)

GENERAL CONDITION

1. ALL ENTRIES MUST BE TYPEWRITTEN OR WRITTEN LEGIBLY.
2. DELIVERY PERIOD WITHIN 7 WORKING DAYS UPON RECEIPT OF P.O.
3. PLACE OF DELIVERY SHALL BE MADE AT PGSO WAREHOUSE, PROVINCIAL CAPITOL, MATTI, DIGOS CITY.
4. WARRANTY SHALL BE FOR A PERIOD OF AT LEAST SIX (6) MONTHS FOR SUPPLIES & MATERIALS, AT LEAST ONE (1) YEAR FOR EQUIPMENT FROM DATE OF ACCEPTANCE BY THE PROCURING ENTITY.

MEDICINES EXPIRATION: MINIMUM OF 1 YEAR FROM THE DATE DELIVERY.

5. PRICE VALIDITY SHALL BE FOR A PERIOD OF 30 CALENDAR DAYS EXCEPT FOR HIGH PERISHABLE GOODS, FUEL AND OTHER ITEMS WARRANTED UNDER THE CIRCUMSTANCES.
6. BIDDERS MAY SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATION OF THE PRODUCT BEING OFFERED (EQUIPMENT ONLY)
7. IF APPLICABLE, BRAND NAME SHALL BE INDICATED IN THE RFQ BY THE PARTICIPATING SUPPLIER/S. IN THE ABSENCE OF "BRAND NAME" OFFERED SHALL BE A SUFFICIENT GROUND FOR DISQUALIFICATION OF THE PARTICIPATING SUPPLIER/BIDDER.
8. BIDDER IS REQUIRED TO OFFER ONE (1) BRAND ONLY. IN CASE OF THE BIDDER OFFERED MULTIPLE BRANDS, SAID BIDDER WILL BE AUTOMATICALLY DISQUALIFIED.
9. IF THE SUBJECT ITEMS FOR TIE BREAKING IS OF A MINIMUM AMOUNT (P 1.00 TO P 1,000.00), THE AWARD WILL BE GIVEN TO THE LOWEST CALCULATED AND RESPONSIVE BIDDER WITH THE HIGHEST TOTAL VALUE OF ITEMS AWARDED.
10. ALL REQUEST FOR QUOTATION (RFQ'S)/CANVASS FORMS MUST BE PUT INSIDE AN ENVELOPE PROPERLY SEALED AND MARKED (EXCEPT FOR RFQ'S SUBMITTED THROUGH THE BAC EMAIL).
11. RFQs/CANVASS FORMS SHALL NOT BE ACCEPTED FOR DROPPING WHEN ANY OF THE FOLLOWING CONDITIONS EXIST:

- a. NOT ENCLOSED IN AN ENVELOPE
- b. ENVELOPE NOT PROPERLY SEALED
- c. TAMPERED ENVELOPE

12. ENVELOPE MUST BE MARKED WITH THE FOLLOWING DETAILS:

- a. COMPANY NAME
- b. CONTACT NUMBER
- c. PURCHASE REQUEST NO. & DATE
- d. SCHEDULE OF DROPPING/BID OPENING



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Enp. RAUL D. RAUT

PGDH-HRMO / BAC CHAIRPERSON

PR. NO.: **0306-CB-22**

End User:

NORJANNA M. CAMAGUIN, MPA
 ITOO-IV/Head-BAC Secretariat

Dated: **02/17/2022**

PHO

Item No.	Unit	Item and Description	Qty	Approved Budget for Contract (ABC) Total	Approved Budget for Contract (ABC) Unit	Supplier's Quotation Unit Price	Brand Name
2.37	CAP	CEFALEXIN Monohydrate 250mg cap	1000	3,000.00	3.00		
2.38	CAP	CEFALEXIN Monohydrate 500mg cap	3500	17,500.00	5.00		
2.39	BOT	CEFIXIME 100mg/5ml 50ml susp	72	21,240.00	295.00		
2.40	CAP	CEFIXIME 200mg cap	2000	24,000.00	12.00		
2.41	BOT	CEFUROXIME Axetil 125mg/5ml susp 70ml	144	25,200.00	175.00		
2.42	TAB	CEFUROXIME Axetil 500mg tab	3000	45,000.00	15.00		
2.43	CAP	CELECOXIB 200mg cap	3000	31,500.00	10.50		
2.44	CAP	CELECOXIB 400mg cap	1000	20,000.00	20.00		
2.45	BOT	CETERIZINE 10mg/ml, 10ml Oral drops	144	23,760.00	65.00		
2.46	TAB	CETERIZINE HCl 10mg tab	3000	9,000.00	3.00		
2.47	BOT	CHLORHEXETIDINE GLUCONATE 0.12% Liquid 120ml	144	15,840.00	110.00		
2.48	TAB	CHLORPHENAMINE MALEATE 4mg tab	500	500.00	1.00		
2.49	TAB	CILOSTAZOL 50mg tab	500	5,500.00	11.00		
2.50	TAB	CINNARIZINE 25mg tab	500	500.00	1.00		
2.51	TAB	CIPROFLOXACIN 500mg tab	500	3,750.00	7.50		
2.52	TAB	CLARITHROMYCIN 500mg tab	500	7,500.00	15.00		
2.53	CAP	CLINDAMYCIN HCl 300mg cap	2500	12,500.00	5.00		
2.54	TUBE	CLOBETASOL PROPIONATE CREAM 0.05%, 5g tube	12	1,140.00	95.00		
2.55	TUBE	CLOBETASOL PROPIONATE OINTMENT 0.05%, 5g tube	12	576.00	48.00		
2.56	TAB	CLONIDINE HCl 150mcg tab	500	8,000.00	16.00		
2.57	TAB	CLOPIDOGREL 75mg tab	1500	15,000.00	10.00		
2.58	CAP	CLOXACILLIN SODIUM 500mg cap	500	4,000.00	8.00		
2.59	BOT	CO-AMOXICLAV 457.5mg/5ml 70ml susp	72	14,040.00	195.00		
2.60	TAB	CO-AMOXICLAV 625mg tab	3000	45,000.00	15.00		
2.61	TAB	CO-AMOXICLAV 875mg+125mg tab	1000	11,000.00	11.00		
2.62	TAB	COLCHICINE 500mcg tab	1500	3,375.00	2.25		
2.63	TAB	DEXAMETHASONE 4mg tab	300	6,900.00	23.00		
2.64	TAB	DICLOFENAC SODIUM 50mg tab	200	200.00	1.00		
2.65	TAB	DICYCLOVERINE 10mg tab	300	600.00	2.00		
2.66	BOT	DICYCLOVERINE 10mg/5ml, 60ml syrup	72	2,160.00	30.00		
2.67	TAB	DIGOXIN 250mcg tab	500	2,500.00	5.00		
2.68	TAB	DILTIAZEM HCl 60mg tab	300	2,250.00	7.50		
2.69	BOT	DIPHENHYDRAMINE HCl 12.5mg/5ml syrup 60ml	36	864.00	24.00		
2.70	TAB	DOMPERIDONE 10mg tab	2000	6,000.00	3.00		
2.71	TAB	ERYTHROMYCIN 500mg tab	500	3,250.00	6.50		
2.72	TUBE	ERYTHROMYCIN EYE OINTMENT 0.5%, 3.5g Tube	200	25,000.00	125.00		
2.73	BOT	FERROUS SULFATE(30mg Elemental iron/5ml) 60ml syrup	72	1,800.00	25.00		
2.74	TAB	FINASTERIDE 5mg tab	300	4,500.00	15.00		
2.75	PC	FLUTICASONE+SALMETEROL 250mcg+25mcgx120doses MDI	12	4,200.00	350.00		

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PR. NO.: 0306-CB-22

End User:

NORJAMA M. CAMAGUIN, MPA
LTDD-IV/Head-BAC Secretariat

Dated: 02/17/2022

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2.76	CAP	FERROUS SULFATE +FOLIC ACID 60mg Elemental iron + 400mcg cap	1500	4,500.00	3.00		
2.77	CAP	FLUNARIZINE HCl 5mg cap	200	10,000.00	50.00		
2.78	TAB	FUROSEMIDE 20mg tab	500	1,000.00	2.00		
2.79	TAB	FUROSEMIDE 40mg tab	1000	3,000.00	3.00		
2.80	TUBE	FUSIDATE SODIUM/FUSIDIC ACID Ointment 2%, 15g tube	48	21,600.00	450.00		
2.81	CAP	GABAPENTIN 100mg cap	200	3,000.00	15.00		
2.82	CAP	GABAPENTIN 300mg cap	200	3,200.00	16.00		
2.83	TAB	GLICLAZIDE 60mg MR tab	1000	11,000.00	11.00		
2.84	TAB	GLICLAZIDE 80mg tab	1500	6,750.00	4.50		
2.85	BOT	HYDROGEN PEROXIDE SOL'N 3% 120ml bot.	144	3,600.00	25.00		
2.86	TAB	HYOSCINE -N-BUTYLBROMIDE 10mg tab	500	2,250.00	4.50		
2.87	BOT	HYPROMELLOSE OPTHALMIC SOLUTION 0.3%, 10ml Bot	100	15,000.00	150.00		
2.88	BOT	IBUPROFEN 200mg/5ml 60ml Bot	72	6,120.00	85.00		
2.89	TAB	IBUPROFEN 400mg tab	500	1,250.00	2.50		
2.90	TAB	IRBESARTAN 150mg tab	500	4,875.00	9.75		
2.91	TAB	IRBESARTAN 300mg tab	300	4,500.00	15.00		
2.92	TAB	ISOSORBIDE DINITRATE 10mg tab	300	2,700.00	9.00		
2.93	TAB	ISOSORBIDE DINITRATE 5mg Sublingual tab	200	1,650.00	8.25		
2.94	TAB	ISOSORBIDE-5-MONONITRATE 30mg tab	300	3,000.00	10.00		
2.95	TAB	ISOSORBIDE-5-MONONITRATE 60mg MR tab	300	2,250.00	7.50		
2.96	TAB	ISOXSUPRINE HCl 10mg tab	600	4,200.00	7.00		
2.97	TUBE	KETOCONAZOLE 2%, 15g aluminum tube	12	1,020.00	85.00		
2.98	BOT	LAGUNDI 300g/5ml 60ml syrup	288	14,400.00	50.00		
2.99	TAB	LAGUNDI 300mg tab	1000	2,000.00	2.00		
2.100	CARP	LIDOCAINE 2%, 1.8ml W/ EPINEPHRINE Carp	2000	38,000.00	19.00		
2.101	BOT	LACTULOSE 3.3g/5ml, 120ml syrup	144	13,680.00	95.00		
2.102	TAB	LORATADINE 10mg tab	500	2,750.00	5.50		
2.103	TAB	LOSARTAN POTASSIUM 100mg tab	5000	25,000.00	5.00		
2.104	TAB	LOSARTAN POTASSIUM 50mg tab	10000	40,000.00	4.00		
2.105	TAB	MEDROXYPROGESTERONE ACETATE 10mg tab	200	15,000.00	75.00		
2.106	TAB	MEFENAMIC ACID 500mg tab	10000	50,000.00	5.00		
2.107	TAB	METFORMIN 500mg tab	1500	7,500.00	5.00		
2.108	TAB	METHEYLDOPA 250mg tab	500	4,250.00	8.50		
2.109	TAB	METOPROLOL TARTRATE 100mg tab	500	1,500.00	3.00		
2.110	TAB	METOPROLOL TARTRATE 50mg tab	500	1,000.00	2.00		
2.111	TAB	METRONIDAZOLE 500mg tab	1500	15,000.00	10.00		
2.112	TAB	MONTELUKAST 10Mg Tab	2000	15,000.00	7.50		
2.113	CAP	MULTIVITAMINS + IRON adult cap	5000	17,500.00	3.50		

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(Company Name & Address)

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Please quote your price on items listed below, subject to General Conditions at the back of this page, stating the shortest time of delivery and submit your quotation at Room 4, Capitol Building, Mati, Digos City not later than **April 21, 2022 @ 9:00 AM**. Late submission of quotation shall not be accepted. Thank you.

Request for Quotation's opening shall be on **April 21, 2022 @ 10:00 AM** via Google Meet Application through this link: meet.google.com/ajm-bjbx-yjd. Request for Quotations will be opened in the presence of the Bidders who choose to attend. Thank you.

Enp. RAUL D. RAUT

PGDH-HRMO / BAC CHAIRPERSON

PR. NO.: **0306-CB-22**

End User:
PHO

NORHANA M. CAMAGUIN, MPA
 HOO-IV/Head-BAC Secretariat

Dated: **02/17/2022**

Item No.	Unit	Item and Description	Qty	Approved Budget for Contract (ABC) Total	Approved Budget for Contract (ABC) Unit	Supplier's Quotation Unit Price	Brand Name
2.114	TUBE	MUPIROCIN OINTMENT 2% 15g tube	100	12,000.00	120.00		
2.115	CAP	NIFEDIPINE 10mg cap	500	1,750.00	3.50		
2.116	BOT	OFLOXACIN EYE DROPS 0.3% 5ml bot.	24	4,680.00	195.00		
2.117	CAP	OMEPRAZOLE 20mg cap	500	2,500.00	5.00		
2.118	CAP	OMEPRAZOLE 40mg cap	600	4,500.00	7.50		
2.120	BOT	PARACETAMOL 100mg/ml, 15ml bot.	144	3,600.00	25.00		
2.121	BOT	PARACETAMOL 250mg/5ml, 60ml bot.	144	5,040.00	35.00		
2.122	TAB	PARACETAMOL 500mg tab	10000	20,000.00	2.00		
2.123	CAP	PHENYTOIN SODIUM 100mg cap	300	4,500.00	15.00		
2.124	TAB	POTASSIUM CHLORIDE 750mg durules	1000	12,000.00	12.00		
2.125	BOT	POVIDONE IODINE Oral Antiseptic 1%, 120ml	72	16,200.00	225.00		
2.126	BOT	PREDNISOLONE ACETATE EYE DROPS 1%, 5ml Bot	24	3,960.00	165.00		
2.127	TAB	PREDNISONE 10mg tab	300	975.00	3.25		
2.128	TAB	PREDNISONE 20mg tab	300	1,350.00	4.50		
2.129	TAB	PREDNISONE 5mg tab	500	1,000.00	2.00		
2.130	TAB	PROPANOLOL HCl 10mg tab	400	3,600.00	9.00		
2.131	TAB	PROPANOLOL HCl 40mg tab	500	7,500.00	15.00		
2.132	TAB	PROPYLTHIOURACIL 50mg tab	500	7,500.00	15.00		
2.133	TAB	RANITIDINE 150mg Tab	500	2,500.00	5.00		
2.134	TAB	ROSUVASTATIN CALCIUM 20mg Tab	700	10,500.00	15.00		
2.135	NEB	SALBUTAMOL SULFATE 1mg/ml, 2.5ml(unit dose)	1000	10,950.00	10.95		
2.136	PC	SALBUTAMOL SULFATE MDI 100mcg/dose x 200 actuation	36	4,500.00	125.00		
2.137	TAB	SAMBONG 500mg tab	1500	8,250.00	5.50		
2.138	TAB	SODIUM BICARBONATE 325mg tab	1200	1,800.00	1.50		
2.139	TAB	SODIUM BICARBONATE 650mg tab	2400	4,800.00	2.00		
2.140	TAB	SPIRONOLACTONE 25mg tab	500	7,500.00	15.00		
2.141	TAB	TELMISARTAN + HYDROCHLOROTHIAZIDE 40mg+12.5mg tab	240	2,400.00	10.00		
2.142	BOT	TOBRAMYCIN + DEXAMETHASONE EYE DROPS 0.3% + 0.1% 5ml bot	36	6,480.00	180.00		
2.143	TUBE	TOBRAMYCIN + DEXAMETHASONE EYE OINTMENT 0.3% + 0.1% 3.5g tube	12	4,740.00	395.00		
2.144	BOT	TOBRAMYCIN EYE DROPS SOLUTION 0.3%,5ml bot.	36	7,020.00	195.00		

Note: In case of tie quotation between suppliers, the BAC is hereby authorized to do the toss coins/draw lots.

ITR/BTR and Omnibus sworn statement shall be submitted prior to the release of payment in the case of Small Value Procurement.

After having carefully read and accepted your General Conditions at the back, I/We have quote you on the item/s at prices noted

(Name & Signature or proprietor or its duly authorized representative)

CANVASSER:

Valid ID

Name & Signature of Canvasser

(Telephone, Cellphone No. Or Email Address)

GENERAL CONDITION

1. ALL ENTRIES MUST BE TYPEWRITTEN OR WRITTEN LEGIBLY.
 2. DELIVERY PERIOD WITHIN 7 WORKING DAYS UPON RECEIPT OF P.O.
 3. PLACE OF DELIVERY SHALL BE MADE AT PGSO WAREHOUSE, PROVINCIAL CAPITOL, MATTI, DIGOS CITY.
 4. WARRANTY SHALL BE FOR A PERIOD OF AT LEAST SIX (6) MONTHS FOR SUPPLIES & MATERIALS, AT LEAST ONE (1) YEAR FOR EQUIPMENT FROM DATE OF ACCEPTANCE BY THE PROCURING ENTITY.
- MEDICINES EXPIRATION: MINIMUM OF 1 YEAR FROM THE DATE DELIVERY.
5. PRICE VALIDITY SHALL BE FOR A PERIOD OF 30 CALENDAR DAYS EXCEPT FOR HIGH PERISHABLE GOODS, FUEL AND OTHER ITEMS WARRANTED UNDER THE CIRCUMSTANCES.
 6. BIDDERS MAY SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATION OF THE PRODUCT BEING OFFERED (EQUIPMENT ONLY)
 7. IF APPLICABLE, BRAND NAME SHALL BE INDICATED IN THE RFQ BY THE PARTICIPATING SUPPLIER/S. IN THE ABSENCE OF "BRAND NAME" OFFERED SHALL BE A SUFFICIENT GROUND FOR DISQUALIFICATION OF THE PARTICIPATING SUPPLIER/BIDDER.
 8. BIDDER IS REQUIRED TO OFFER ONE (1) BRAND ONLY. IN CASE OF THE BIDDER OFFERED MULTIPLE BRANDS, SAID BIDDER WILL BE AUTOMATICALLY DISQUALIFIED.
 9. IF THE SUBJECT ITEMS FOR TIE BREAKING IS OF A MINIMUM AMOUNT (P 1.00 TO P 1,000.00), THE AWARD WILL BE GIVEN TO THE LOWEST CALCULATED AND RESPONSIVE BIDDER WITH THE HIGHEST TOTAL VALUE OF ITEMS AWARDED.
 10. ALL REQUEST FOR QUOTATION (RFQ'S)/CANVASS FORMS MUST BE PUT INSIDE AN ENVELOPE PROPERLY SEALED AND MARKED (EXCEPT FOR RFQ'S SUBMITTED THROUGH THE BAC EMAIL).
 11. RFQs/CANVASS FORMS SHALL NOT BE ACCEPTED FOR DROPPING WHEN ANY OF THE FOLLOWING CONDITIONS EXIST:
 - a. NOT ENCLOSED IN AN ENVELOPE
 - b. ENVELOPE NOT PROPERLY SEALED
 - c. TAMPERED ENVELOPE
 12. ENVELOPE MUST BE MARKED WITH THE FOLLOWING DETAILS:
 - a. COMPANY NAME
 - b. CONTACT NUMBER
 - c. PURCHASE REQUEST NO. & DATE
 - d. SCHEDULE OF DROPPING/BID OPENING



Republic of the Philippines
PROVINCE OF DAVAO DEL SUR
Matti, Digos City

BIDS AND AWARDS COMMITTEE'
CANVASS/REQUEST FOR QUOTATION

Negotiated Procurement - After 2 Failed Biddings (Sec 53.1)

April 13, 2022

(Company Name & Address)

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NORJANNY M. CAMAGUIN, MPA
LTO/IV/Head-BAC Secretariat

PGDH-HRMO / BAC CHAIRPERSON

Dated: **02/17/2022**

PHO

Item No.	Unit	Item and Description	Qty	Approved Budget for Contract (ABC) Total	Approved Budget for Contract (ABC) Unit	Supplier's Quotation Unit Price	Brand Name
		Charges: REQUISITION SHOULD BE BY LOT BIDDING CHARGES: GENERAL FUND 2022 5-02-03-070 Purpose/Remarks: FOR HOSPITAL USE NOTE: KINDLY SEE GENERAL CONDITIONS AT THE BACK OF THE RFQ AS PART OF THE CONTRACT.		1,415,625.00			

Note: In case of tie quotation between suppliers, the BAC is hereby authorized to do the toss coins/draw lots.

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After having carefully read and accepted your General Conditions at the back, I/We have quote you on the item/s at prices noted

(Name & Signature or proprietor or its duly authorized representative)

CANVASSER:

Valid ID

Name & Signature of Canvasser

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Page 5 of 5

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