

Republic of the Philippines
Province of Davao Occidental
MUNICIPALITY OF MALITA

Standard Form Number: SF -GOOD-60

Revised on : May 24,2004

Standard Form Title: REQUEST FOR QUOTATION

Date : _____
Quotation No. : _____
PR # _____

Company Name : _____
Address : _____

Please quote your lowest price on the item/s listed below, subject to the hereunder General Conditions, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than _____ in the return envelope attached herewith.


ANALIZA A. CONDINATO
BAC Chairperson

- Note
1. All entries must be typewritten
 2. Delivery Period within **10 days** calendar days
 3. Warranty shall be for the period 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 the period of **90 days** calendar days.
 5. G-EPS Registration Certificate shall be attached upon submission of the Qoutation.
 6. Bidders shall submit Original Brochures showing certifications of the product being offered.

| ITEM NO. | QTY. | UNIT OF ISSUE | ITEM & DESCRIPTION | ESTIMATED COST | TOTAL |
|----------|------|---------------|--------------------------------------|----------------|-------|
| 1 | 160 | bots | Ascorbic acid drops 10ml | | |
| 2 | 160 | bots | Phenylpropanolamine drops 10ml | | |
| 3 | 160 | bots | Paracetamol drops 10ml | | |
| 4 | 160 | boxes | Amlodipine 10mg tab 100's | | |
| 5 | 160 | boxes | Losartan 100mg tab 100's | | |
| 6 | 165 | boxes | Paracetamol 500mg tab 100s | | |
| 7 | 160 | boxes | Ascorbic Acid + zinc 500mg tab 100's | | |
| 8 | 160 | bots | Carbocisteine 125mg syr 60ml | | |
| 9 | 160 | bots | Ascorbic acid syr 120ml | | |
| 10 | 160 | bots | Paracetamol 250mg susp 60ml | | |
| 11 | 160 | bots | Ambroxol 15mg syr 60ml | | |
| 12 | 160 | bots | Phenylpropanolamine 12.5mg syr 60ml | | |

Brand and Model: _____
Delivery Period : _____
Warranty : _____
Price Validity : _____

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

Printed Name and Signature

Tel. No. / Cellphone No.

Date