



## REQUEST FOR QUOTATION

The Philippine Statistics Authority (PSA) through the Bids and Awards Committee (BAC), intends to

procure		Medical Supplies							
which sha	ll be undertaken in accordance	with	Section	53.9 (Small Value Procurement)					
of the 201	6 Revised Implementing Rules	and Regulations of Republi	ic Act No. 9184, with an Approved Bu	idget of the					
Contract (	ABC) in the amount of Php			wo Thousand Seven Hundred Ten Pesos Only					
	Please quote your best offer	r for the item/s described h	nerein, subject to the Terms and Con-	uditions provided					
below. Sul	bmit your quotation duly signed	by you or your duly authori:	zed representative not later than	dilions provided					
MAR 1	And the second s	1:00 AM through e		bac-secretariat@psa.gov.ph					
	For any clarification, you may	y contact us at telephone no	o. (02) 8374-8263 or email address at						
gsdprocure	ment.psa@gmail.com			MINERVA ELOISA P. ESQUIVIAS Chairperson Bids and Awards Committee					
			TERMS AND CONDITIONS						
1	Bidders shall provide correct and			1					
2	Price quotattion/s must be valid for a period of thirty (30) calendar days from the date of submission.								
3	Price quotation/s, to be denominated in Philippine peso, shall include all taxes, duties and/or levies payable.								
4	Quotations exceeding the ABC sh		TO THE STATE OF TH						
5	Award of contract shall be made to	o the lowest calculated and respo	onsive bid (LCRB).						
6	Any interlineations, erasures or ov	ures or overwriting shall be valid only if they are signed or initialed by you or your duly authorized representative.							
7	In case of two or more bidders are determined to have submitted the LCRB, the PSA shall adopt and employ "draw lots" as the tie-breaking method to finally detrmine the single winning bidder in accordance with GPPB Circular 06-2005.								
8	The item/s shall be delivered acco		ed in the Purchase Request (PR)						
9	The PSA shall have the right to ins	spect and/or test the goods to co	nfirm their conformity to the Technical Spec	rifications					
10	Payment shall be made after deliving Land Bank of the Philippines, shall be made after deliving the payment of the Philippines.	very and upon submission of the rehall credit the amount due to the i	required supporting documents, i.e. Order Sidentified bank of the supplier not earlier th	Slip and/or Billing Statement, by the supplier. Our Government Servicing Bank,					
receipt of our advice. Please note that the corresponding bank transfer fee, if any, shall be chargeable to the account of the supplier.  Liquidated damages equivalent to one tenth (1/10) of one percent (1%) of the value of the goods not delivered within the prescribed period shall be imposed per day of delay. The PSA rescind the contract once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, without prejudice to other courses of action and reme to it.									
	Documents to be submitted		Deadline	Remarks					
Copy of the 20 PhilGEPS Regi	25 Mayor's/Business Permit or valid stration	not later than MAR 13	<u>20</u> 25	together with the quotation					

Documents to be submitted	Deadline	Remarks			
Copy of the 2025 Mayor's/Business Permit or valid PhilGEPS Registration	not later than MAR 1 3 2025	together with the quotation			
Omnibus Sworn Statement (OSS) Supporting document to be submitted, as may be applicable: a. For Sole Proprietorship If owner, the Notarized OSS; If authorized representative-Notarized Special Power of Attorney & OSS b. For Corporation Notarized Secretary's Certificate c. Partnership-anyone of the partners, OSS	Upon acknowledgment of Notice of Award				





PSA Complex, East Avenue, Diliman, Quezon City, Philippines 1101 Telephone: (632) 8938-5267 www.psa.gov.ph

After having carefully read and accepted the Terms and Conditions, I/We submit our quotation/s for the item/s as follows:

MEDICAL SUPPLIES  Customized Medicine Bag Organizer (Medium) with PSA logo and inclusion of the following medicines: 100 pcs Paranestamol 500mg tablet (per tablet) 100 pcs Lordardine 10mg tablet (pe	After having carefully read and accepted the Terms and Conditions, I/We submit our quotation/s	s for the ite	m/s as follows:				
MEDICAL SUPPLIES  Customized Medicine Bag Organizer (Medium) with PSA logo and inclusion of the following medicines:  100 pes Paracetamia 6000 grospute (per tablet)  30 pes Melizine Pythorolitoide 25mg lablet (per tablet)  30 pes Melizine Pythorolitoide 75mg lablet (per tablet)  30 pes Noseine n-butyltromote 15mg tablet (per tablet)  11 pool 25mc Ovide + Callamine Sachet (20 sachet)  12 pe Paracetamio Syrup (22 years old) 60mL  12 pe Paracetamio Syrup (22 years old) 60mL  13 pe Robert (pediatric)  14 pe Paracetamio Syrup (7-12 years old) 60mL  15 pe Robert (pediatric)  15 pe November (pediatric)  16 pe November (pediatric)  17 pe November (pediatric)  17 pe November (pediatric)  18 pe November (pediatric)  19 pe November (pediatric)  20 per November (				Unit Price	(VAT	Technical Specifications	
Customized Medicine Bag Organizer (Medium) with PSA logo and inclusion of the following medicines:  10 per Parcelamon Stomp tablet (per tablet) 10 per Americanno Stomp (Se years of 10 Stom). 11 per Parcelamon Stomp (Se years of 10 Stom). 12 per Americanno Stomp (Se years of 10 Stom). 13 per Americanno Stomp (Se years of 10 Stom). 14 per Parcelamon Stomp (Se years of 10 Stom). 15 per Americanno Stomp (Se years of 10 Stom). 15 per Americanno Stomp (Se years of 10 Stom). 16 per Americanno Stomp (Se years of 10 Stom). 17 per Puter Comitor (pediatric)  18 per Americanno Stomp (Se years of 10 Stom). 19 per Puter Comitor (pediatric)  19 per Americanno Stomp (pediatric)  19 per Americanno Stomp (pediatric) 19 pediatricanno S						Yes	No
of the following medicines: 10 pps Paracetania Stoning tablet (per tablet) 10 pps Paracetania Stoning tablet (per tablet) 10 pps Anument Stoning tablet (per tablet) 10 pps Paracetania Pydrochioride Zing tablet (per tablet) 10 pps Paracetania Stoning Paracetania Stoning (Pediatric Kit) with PSA (pos and inclusion of the following: 11 (pox) Zinc Oxder + Calamine Sacriet (Zio sachet) 12 ppc Paracetania Symp (7.12 years old) 60mL 13 ppc Paracetania Symp (7.12 years old) 60mL 14 ppc Paracetania Symp (7.12 years old) 60mL 15 ppc Paracetania Symp (7.12 years old) 60mL 16 ppc Paracetania Symp (7.12 years old) 60mL 17 ppc Paracetania Symp (7.12 years old) 60mL 19 ppc Symporia Symp (7.12 years old) 60mL 19 ppc Paracetania Symp (7.12 years old) 60mL 19 ppc Paraceta	MEDICAL SUPPLIES						
100 ps. Loratedine 10mg tablet (per tablet) 30 ps. Melziner Hydrochnide 25mg tablet (per tablet) 30 ps. Malziner Hydrochnide 25mg tablet (per tablet) 30 ps. Laburnium hydrocide, Magnesium hydroside, simeticone 175mg/23mg/30mg/30mg (per tablet) 30 ps. Lyoscine n-bultybrometel 10mg tablet (per tablet) 30 ps. Lyoscine n-bultybrometel 20mg tablet (per tablet) 30 ps. Calonidine Hydrochnide 75mg tablet (per tablet) 40 ps. Calonidine 15mg 15mg 15mg 15mg 15mg 15mg 15mg 15mg	of the following medicines: 100 pcs Paracetamol 500mg tablet (per tablet)	pcs	6				
Logo and inclusion of the following: 1 (box) Zinco Oxide + Calamine Sachet (20 sachet) 1 poc Glaimine Lotino 30m. 1 poc Paracetamid Syrup (2-12 years old) 60m. 1 poc Paracetamid Syrup (7-12 years old) 60m. 1 poc Vertical Calamid Cal	100 pcs Loratadine 10mg tablet (per tablet) 30 pcs Meclizine Hydrochloride 25mg tablet (per tablet) 30 pcs Aluminum hydroxide, Magnesium hydroxide, simeticone						
following:    pcs   pcs	1 (box) Zinc Oxide + Calamine Sachet (20 sachet) 1 pc Calamine Lotion 30mL 1 pc Paracetamol Syrup (2-6 years old) 60mL 1 pc Paracetamol Syrup (7-12 years old) 60mL 1 pc Cetirizine Dihydrochlroride 10mL 2 pcs fever gel pads (6pads)	pcs	1	,			
1 pc Burn Cintment 5g 1 pc Hydrocordisone 10mg/g cream (15grams) 1 pc Eye drop Molsturizing formula 1 pc Eye drop Rolsturizing formula 1 set Blood Glucose Monitoring System 2 boxes Blood Lancet/needle, 50 pcs/box 2 boxes Blood Lancet/needle, 50 pcs/box 2 boxes Blood Glucose Monitoring Test Strips 1 Digital Thermometer 2 boxes Stello Gauze pads 4x4 8ply per box 2 rolls Gauze Bandage, roll 3 inches x 10 yds 2 rolls Gauze Bandage, roll 3 inches x 10 yds 2 rolls Gauze Bandage, roll 3 inches x 10 yds 1 pc Bandage Scissors 1 pc Trilangular Bandage 6 pcs. Safety Pins 2 sets Tongue Depressors wooden (100s individually pack) 1 pc Hot Water Bag 1000ml 2 pcs Ice Bag 3 pcs Disposable Hypodermic Syringes with needle 3cc 1 pc Pick-up forceps 1 pc pulse oximeter  Customized First Aid Kit with PSA logo (standard contents) for QRT *Provide sample photo of the medical supplies 1 pc pulse oximeter  Customized First Aid Kit with PSA logo (standard contents) for QRT *Provide sample photo of the medical supplies Registration (CPR) from the Philippine FDA *The product must be FDA-approved and have a Certificate of Product Registration (CPR) from the Philippine FDA *The product should have a minimum shelf life of 24 months from the manufacturing date, with at least 18 months of shelf life remaining at the time of delivery  Printed name of the authorized representative:    Signature:	following: 4 pcs Povidone Iodine 60ml (bottle)	pcs	5				
1 pc Eye drop Moisturizing formula 1 pc Eye drop red eye formula 1 set Blood Glucose Monitoring System 2 boxes Blood Lancet/needle, 50 pcs/box 2 boxes Blood Clucose Monitoring Test Strips 1 Digital Thermometer 2 boxes Steride Gauze pads 4x4 8ply per box 2 rolls Gauze Bandage, roll 3 inchex x 10 yds 2 rolls Transpore adhesive tape, roll 1 inch x 10 yds 1 pc Bandage Scissors 1 pc Triangular Bandage 6 pcs. Safety Pins 2 sets Tongue Depressors wooden (100s individually pack) 1 pc Hot Water Bag 1000ml 2 pcs Ice Bag 3 pcs Disposable Hypodermic Syringes with needle 3cc 1 pc Pick-up forceps 1 pc pulse oximeter  Customized First Aid Kit with PSA logo (standard contents) for QRT "Provide sample photo of the medical supplies "The product must be FDA-approved and have a Certificate of Product Registration (CPR) from the Philippine FDA "The product should have a minimum sheff life of 24 months from the manufacturing date, with at least 18 months of shelf life remaining at the time of delivery  Printed name of the authorized representative:    Signalure:	1 pc Hydrogen Peroxide 60ml (bottle) 1 pc Burn Ointment 5g 1 pc Mupirocin Ointment 5g						
2 boxes Blood Lancet/needle, 50 pcs/box 2 boxes Blood Glucose Monitoring Test Strips 1 Digital Thermometer 2 boxes Sterile Gauze pads 4x4 8ply per box 2 rolls Gauze Bandage, roll 3 inches x 10 yds 2 rolls Transpore adhesive tape, roll 1 inch x 10 yds 1 pc Triangular Bandage 6 pcs.Safety Pins 2 sets Tongue Depressors wooden (100s individually pack) 1 pc Hot Water Bag 1000ml 2 pcs loe Bag 3 pcs Disposable Hypodermic Syringes with needle 3cc 1 pc Pick-up forceps 1 pc pulse oximeter  Customized First Aid Kit with PSA logo (standard contents) for QRT "Provide sample photo of the medical supplies "The product must be FDA-approved and have a Certificate of Product Registration (CPR) from the Philippine FDA "The product should have a minimum sheff life of 24 months from the manufacturing date, with at least 18 months of shelf life remaining at the time of delivery  Printed name of the authorized representative:  Signalure:  Name of Company:  Address:  Tel. No.:  Mobile No.:  Mobile No.:	1 pc Eye drop Moisturizing formula 1 pc Eye drop red eye formula						
2 rolls Gauze Bandage, roll 3 inches x 10 yds 2 rolls Transpore adhesive tape, roll 1 inch x 10 yds 1 pc Bandage Scissors 1 pc Triangular Bandage 6 pcs. Safety Pins 2 sets Tongue Depressors wooden (100s individually pack) 1 pc Hot Water Bag 1000ml 2 pcs loe Bag 3 pcs Disposable Hypodermic Syringes with needle 3cc 1 pc Pick-up forceps 1 pc pulse oximeter  Customized First Aid Kit with PSA logo (standard contents) for QRT  *Provide sample photo of the medical supplies *The product must be FDA-approved and have a Certificate of Product Registration (CPR) from the Philippine FDA *The product should have a minimum shelf life of 24 months from the manufacturing date, with at least 18 months of shelf life remaining at the time of delivery  Printed name of the authorized representative:    Position:	2 boxes Blood Lancet/needle, 50 pcs/box 2 boxes Blood Glucose Monitoring Test Strips 1 Digital Thermometer						
1 pc Triangular Bandage 6 pcs.Safety Pins 2 sets Tongue Depressors wooden (100s individually pack) 1 pc Hot Water Bag 1000ml 2 pcs Ice Bag 3 pcs Disposable Hypodermic Syringes with needle 3cc 1 pc Pick-up forceps 1 pc pulse oximeter  Customized First Aid Kit with PSA logo (standard contents) for QRT *Provide sample photo of the medical supplies *The product must be FDA-approved and have a Certificate of Product Registration (CPR) from the Philippine FDA *The product should have a minimum shelf life of 24 months from the manufacturing date, with at least 18 months of shelf life remaining at the time of delivery  Signature:  Name of Company:  Address:  Fax No:  Tel. No.:  Mobile No.:  Mobile No.:	2 rolls Gauze Bandage, roll 3 inches x 10 yds 2 rolls Transpore adhesive tape, roll 1 inch x 10 yds						
2 pcs Ice Bag 3 pcs Disposable Hypodermic Syringes with needle 3cc 1 pc Pick-up forceps 1 pc pulse oximeter  Customized First Aid Kit with PSA logo (standard contents) for QRT  "Provide sample photo of the medical supplies  "The product must be FDA-approved and have a Certificate of Product Registration (CPR) from the Philippine FDA  "The product should have a minimum shelf life of 24 months from the manufacturing date, with at least 18 months of shelf life remaining at the time of delivery  Printed name of the authorized representative:  Signature:  Signature:  Address:  Email address:  Email address:	1 pc Triangular Bandage 6 pcs.Safety Pins 2 sets Tongue Depressors wooden (100s individually pack)						
Customized First Aid Kit with PSA logo (standard contents) for QRT  *Provide sample photo of the medical supplies  *The product must be FDA-approved and have a Certificate of Product Registration (CPR) from the Philippine FDA  *The product should have a minimum shelf life of 24 months from the manufacturing date, with at least 18 months of shelf life remaining at the time of delivery  Printed name of the authorized representative:  Name of Company:  Address:  Tel. No.:  Tel. No.:  Mobile No.:	2 pcs Ice Bag 3 pcs Disposable Hypodermic Syringes with needle 3cc 1 pc Pick-up forceps 1 pc pulse oximeter						
Name of Company:         Position:           Address:         Email address:           Fax No.:         Tel. No.:         Mobile No.:	*The product must be FDA-approved and have a Certificate of Product Registration (CPR) from the Philippine FDA	pcs	39				
Name of Company:         Position:           Address:         Email address:           Fax No.:         Tel. No.:         Mobile No.:							
Name of Company:         Position:           Address:         Email address:           Fax No.:         Tel. No.:         Mobile No.:	Printed name of the authorized representative:				Signature:		
Address:         Email address:           Fax No.:         Tel. No.:         Mobile No.:				Desition	- Signature:		
Fax No.: Tel. No.: Mobile No.:							
				Email address:			
Date:	Fax No.: Tel. No.:		Mobile No.:				
	Date:			-			