

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT Field Office VII Corner M.J. Cuenco and Gen. Maxilom Ave., Cebu City

REQUEST FOR QUOTATION SHOPPING

		RFQ No.	: DSWD7-2024-0497
		Date	April 23, 2024
Company Name			
		 .	
Company Address		<u></u>	
Contact Person	*		
Contact No.	· -	_	
PhilGEPS Registrati	ion No.:		
Sir/Madam:			
expenses for the go	government price/s including delivery charge ods listed in Annex A. Failure to indicate inforr riptive brochures, catalogues, literatures and/or	mation could be the	ne basis for non-compliance. Also, kindly
If you are the exclus your quotation a duly	vive manufacturer, distributor or agent in the Pr y notarized certification to this effect.	nilippines for the g	goods listed in Annex A , please attach in
Interested service p Registration Numb	providers are required to submit true copies er upon submission of quotation.	s of their valid I	Mayor's/Business Permit & Philgeps
Field Office VII, Ceb	and submit this form together with Annex A ou City or send it through facsimile numbers (0 vd.gov.ph on or before April 29, 2024 at 5:00F	32) 233-8785; 23	mation to the BAC Secretariat, DSWD 3-0261; 231-2172 local 140 or 148 or e-
		Very truly yours	
		× ,, ,	
			UEL M. EDLES
Terms and Condition	one:	AO VIAead, Pro	ocurement Management Section
Award shall be ma		oted price	ot basis
	shall be not less than 60 calendar days.	ited price i	ot basis
	es shall be delivered within 30 days calendar	from receipt and	conformity of Purchase Order
4. Place of Delivery:	Regional Haven for Women, AVRC Com Cebu City	pound, Camom	ot Franza Road, Brgy. Labangon,
5 Terms of Payment	t: within 30 days from the receipt of billing	statomont	general way
Liquidated Damag			makali ka firmanal
7. In case of discrepa	ancy between total price per item and unit price punction of that item, the latter shall prevail.	e for the item as e	extended or
	f applicable:		
+		B	ongoate PCH
		BC	Canvasser
l sur taring at the			Calivassei
r am interested to qu	ote and agree to the terms and conditions.		



DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT Field Office VII, Cebu City

RFQ No. DSWD7-2024-049			
Date:	April 23, 2024		

Item No.	Quantity	Unit of Measure	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply"	Bidder's Specifications	Unit Cost	Total Cost
			Supply and Delivery of Medical Supply				
70			Aluminum hydroxide 178mg +				
1	150	tablet	Magnesium hydroxide 233mg +				Burney or
			Simethicone 30mg, Chewable	a March	addil .		
2	300	tablet	Ambroxol Hydrochloride, 30mg, tablet,				
-			mucolytic				- Market
			Anti-Inflammatory Spray Solution throat		4		
			spray, per ml solution (370.5mg				
2	2	battla	chamomile extract, 1mg methyl				
3	3	pottie	salicylate, 18.5mg peppermint oil, 6mg				
			sage oil, 7mg anise oil, 1mg dwarf pine-				
			needle oil, 0.5ml bergamot oil, 5mg				
			cineol),15ml Ascorbic Acid + Zinc, oral drops,	Committee of the second second	V-14-41-4-41-4-1-4-1-4-1-4-1-4-1-4-1-4-1		
4	25	bottle	40mg/5mg/ml, food supplement, 30ml	10 10 10 10 10 10 10 10 10 10 10 10 10 1	A street		
			Ascorbic Acid + Zinc, syrup, 100mg		14.00		
5	25	bottle	/10mg/5ml, vitamin-mineral, 120ml				
		box	Ascorbic Acid + Zinc, 500mg/10mg,				
6	500		capsule, vitamin, mineral, 100				
			capsules/box				*\ T=137.
	50		Bacillus Clausii, 2 billion/5ml, oral			12 7 5 -	
7		bottle	suspension, antidiarrheal of microbial				
			origin, 5ml			Self-transfer	et just
		box	Calcium + Vitamin D3+ Minerals, 600mg			Com.	
8	300		calcium carbonate, 400 IU Vitamin D3,				
			capsule, 100 tablets/box				
9	100	piece	Metronidazole, 500mg				
10	200	tablet	Cetirizine Dihydrochloride, 10mg, film-				
10	200		coated tablet, antihistamine				
11	30	bottle	FERROUS SULFATE 75mg/0.6ml, Oral	er Scharforgarden	10.00		
	-00		drops, 15ml		F / H# DIL	4.1	
12	30		FERROUS SULFATE, 150ml/5g, Syrup,	1,200,412,334			
12	55		60ml				
13	500		FERROUS SULFATE + Folic acid,				
			300mg/250mcg				
14	100		Evening Primrose Oil 1000mg, Softgel				
15	1	bottle	Hexetidine, 0.1% Solution, Oral	1 110			
			Antiseptic 500ml				
16	100	tablet	Hyoscine + N-butylbromide +		a contract of	15 - X-	
			Paracetamol 100mg/500mg	91111		The same of	
17	100	capsule	Loperamide. 2mg, capsule, antimotility				

Item No.	Quantity	Unit of Measure	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply"	Bidder's Specifications	Unit Cost	Total Cost
18	10	tube	Zinc oxide Benzoic Acid Sulfur Salicylic Acid 15g	- 1 - 1019			
19	200	capsule	Mefenamic acid, 500mg, film-coated tablet, non-steroidal anti-inflammatory drug				
20	30	bottle	MULTIVITAMINS (Vitamins A, B complex, C, D, E), drops, 30ml			la a	
21	30	bottle	MULTIVITAMINS (Vitamins A, B complex, C, D, E), Syrup, 120ml				
22	5	tube	Mupirocin, 20mg/g, ointment, 5g				
23	300	capsule	Paracetamol, 500mg, tablet, analgesic, antipyretic		- A-14-14-15		
24	10	bottle	Paracetamol, oral drops, 100mg/ml, pain reliver and fever reducer, analgesic antiprretic, 30ml				
25	10	bottle	Permethrin, 10mg/ml, shampoo, pediculide, treatment for head lice,60ml				i i
26	10	bottle	Paracetamol syrup, 120mg/5ml, pain reliever and fever reducer, 120ml				
27	300	tablet	Phenylephrine HCI + Chlorphenamine Maleate + Paracetamol,10mg/2mg/500mg, tablet,nasal decongestant, antihistamine, analgesic, antipyretic	1 (100 Or	С.		
28	300	tablet	Phenylpropanolamine Hydrochloride + Brompheniramine Maleate, 15mg/12mg, decongestant, antihistamine				
29	50	piece	Salbutamol Sulfate Nebule, 1mg/ml, sulution for inhalation, anti-asthma, each 2.5ml nebule contains 2.5mg salbutamol (as sulfate), not for injection				
30	4	bottle	Sodium Chloride, 0.65% Buffered Solution, nasal spray, nasal decongestant, 30ml				
31	10	ampoule	Tetanus Toxoid vaccine, suspension for IM injection, 0.5ml				
Tota	1:			The second section of the second	A Reserve		
Appro			ONAL HAVEN FOR WOMEN	Note: "Bidder's Spec	ifications" column	may be filled up	with service
PURPO			egional Haven for Women residents u		y copy "Articles/D	escription" state	ed if applicable.

Note: Procurement procedure in accordance with DSWD-Memorandum Circular No. 2, Series of 2007.

BONAPARTE D. CASEÑAS II
Canvasser

Signature of Supplier / Authorized Representative Over Printed Name

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