

Republic of the Philippines  
**UNIVERSITY OF SOUTHEASTERN PHILIPPINES**  
 Obrero Campus, Bo. Obrero Davao City  
**HEALTH SERVICES DIVISION**  
**Request for Quotation**



FP NO. 0020-02-1706  
 DATE: Feb 5, 2020

Company Name : \_\_\_\_\_  
 Address: \_\_\_\_\_

Please quote your lowest price on the items/ listed below, subject to the General Condition on the last page, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than \_\_\_\_\_ in the return envelope attached herewith

DR. REYNILDO GARCIA  
 BAC- CHAIRMAN *[Signature]*

- Note :
1. All entries must be typewritten.
  2. Delivery Period within    calendar days upon receipt of Purchase Order.
  3. Warranty shall be for a period of six ( 6 ) months for supplies and materials, one ( 1 ) year for Equipment, from date of acceptance by the procuring entity.
  4. Price validity shall be a period of 30 calendar days.
  5. G-EPIS Registration Certificate shall be attached upon submission of the Quotation.
  6. Bidders shall submit Original Brochures showing certification of the product being offered (optional).
  7. Mode of delivery: [  Pick-up (Schedule) [ x ] Door to Door Delivery

Item No.	Unit	ITEM AND DESCRIPTION	QTY.	BID PRICE	
				UNIT PRICE	TOTAL AMOUNT
1	box	FBS Strips 80' s / box (code free)	5		
2	box	Cholesterol strips 10's / box	50		
3	box	Uric Acid strips 25's / box	21		
4	box	Hemoglobin strips 25 's / box	7		
5	box	Lancet 30g ultra fine 100's / box	3		
		nothing follows			

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

Canvassed By: \_\_\_\_\_  
 Authorized Canvasser

Printed Name / Signature \_\_\_\_\_  
 Tel. No. / Cellphone No. \_\_\_\_\_

TTN No. of Establishment \_\_\_\_\_  
 Date \_\_\_\_\_