



Republic of the Philippines
SOCIAL SECURITY SYSTEM
East Avenue, Diliman, Quezon City

REQUEST FOR QUOTATION

2020-0050

SEALED CANVASS

February 28, 2020
Date

PHILGEPS REF. NO.: 6912189
DATE POSTED : 3-4-20
POSTED BY : ERIKA

Sir / Madam:

Please furnish us with your quotation on or before **March 10, 2020 @ 5:00PM** for the following items:

No.	Quantity	PARTICULARS	Unit Cost	Total Cost
		Supplies and materials for use in SSS Annual Medical and Physical Examination for OY 2020 and for Emergency Use with the following requirements:		
		XRAY SECTION		
1	15 Boxes	14" x 14" X-ray Film, 100 Pieces / Box Brand: _____ ABC = P 3,300.00 / Box	P _____/Box	P _____
2	10 Boxes	11" x 14" X-ray Film, 100 Pieces / Box Brand: _____ ABC = P 2,500.00 / Box	P _____/Box	P _____
3	2 Boxes	10" x 12" X-Ray Film, 100 Pieces / Box Brand: _____ ABC = P 2,000.00 / Box	P _____/Box	P _____
4	10 Boxes	Fixer Toner, 2 Liters / Box Brand: _____ ABC = P 1,600.00 / Box	P _____/Box	P _____
5	10 Boxes	Developer Toner, 2 Liters / Box Brand: _____ ABC = P 2,500.00 / Box	P _____/Box	P _____
6	15 Boxes	X-ray Envelope, 14 1/2" x 17 1/2" , 100 Pieces / Box Brand: _____ ABC = P 500.00 / Box	P _____/Box	P _____
		<i>NOTE: X-ray Film & Fixer / Developer Toner must be same brand.</i>		
		CLINICAL SECTION		
7	3 Bottles	0.9% Sodium Chloride for Nebulization 50ml. Brand: _____ ABC = P 100.00 / Bottle	P _____/Bottle	P _____
8	70 Bottles	Alcohol Isopropyl 70% 500ml Brand: _____ ABC = P 70.00 / Bottle	P _____/Bottle	P _____
9	3 Boxes	Disposable Gloves (Large), 100 Pieces / Box Brand: _____ ABC = P 220.00 / Box	P _____/Box	P _____
10	3 Boxes	Disposable Gloves (Medium), 100 Pieces / Box Brand: _____ ABC = P 220.00 / Box	P _____/Box	P _____
11	1 Box	Disposable Mask, 50 Pieces / Box Brand: _____ ABC = P 630.00 / Box	P _____/Box	P _____
12	1 Box	Disposable Needle Gauge 23, 100 Pieces / Box Brand: _____ ABC = P 220.00 / Box	P _____/Box	P _____
13	1 Box	Disposable Needle Gauge 25, 100 Pieces / Box Brand: _____ ABC = P 220.00 / Box	P _____/Box	P _____



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DATE POSTED : 3-4-20
POSTED BY : ERICA

Sir / Madam:

Please furnish us with your quotation on or before **March 10, 2020 @ 5:00PM** for the following items:

No.	Quantity	PARTICULARS	Unit Cost	Total Cost
14	3 Boxes	Disposable Syringe 3.0cc w/ Needle Gauge 23 (per 100) Brand: _____ ABC = P 210.00 / Box	P _____/Box	P _____
15	8 Boxes	Gauze Pad 4" x 4" 8 ply, Sterile (100 Pieces / Box) Brand: _____ ABC = P 240.00 / Box	P _____/Box	P _____
16	12 Bottles	Hydrogen Peroxide 20 vol. 500ml. Brand: _____ ABC = P 70.00 / Bottle	P _____/Bottle	P _____
17	6 Rolls	Plaster Adhesive 2.5cm. X 5m. Brand: _____ ABC = P 350.00 / Roll	P _____/Roll	P _____
18	3 Bottles	Lidocaine HCL Bottle, 50ml. Brand: _____ ABC = P 150.00 / Bottle	P _____/Bottle	P _____
19	3 Bottles	Liquid Soap Handwash, 1,000ml Brand: _____ ABC = P 300.00 / Bottle	P _____/Bottle	P _____
20	10 Cans	Disinfectant Spray, 350gms / can Brand: _____ ABC = P 350.00 / Can	P _____/Can	P _____
21	8 Boxes	Plaster Strips (per 100 Pieces) Brand: _____ ABC = P 70.00 / Box	P _____/Box	P _____
22	4 Boxes	Micropore Tape, 1 inch, 12 Pieces / Box Brand: _____ ABC = P 440.00 / Box	P _____/Box	P _____
23	4 Boxes	Micropore Tape, 1/2 inch, 24 Pieces / Box Brand: _____ ABC = P 440.00 / Box	P _____/Box	P _____
24	10 Bottles	Povidone Iodine Solution, 500 ml. Brand: _____ ABC = P 210.00 / Bottle	P _____/Bottle	P _____
25	5 Boxes	Steri-Strip (1/2" x 4"), 18 Pieces / Box Brand: _____ ABC = P 400.00 / Box	P _____/Box	P _____
26	3 Bottles	Sterile Water for Injection, 50ml. Brand: _____ ABC = P 100.00 / Bottle	P _____/Bottle	P _____
27	5 Boxes	Sufretulle / Intertulle, (10cm x 10cm per box) Brand: _____ ABC = P 400.00 / Box	P _____/Box	P _____
28	2 Boxes	Tuberculin Syringe Gauge 25, 100 Pieces / Box Brand: _____ ABC = P 210.00 / Box	P _____/Box	P _____
29	2 Boxes	Triple A Battery, 40 Pieces / Box Brand: _____ ABC = P 360.00 / Box	P _____/Box	P _____
(Page 2 of 3)				
GRAND TOTAL ABC = P 156,550.00				
HCD – Revised Memo received by PPMD dated 2-26-2020 with Request # 2020-0098				
APP FY 2020 - #238, Supplies & Materials (X-Ray – P 230,240.00; Clinical – P 29,550.00;				
Laboratory – P 150,950.00)				



Republic of the Philippines
SOCIAL SECURITY SYSTEM
 East Avenue, Diliman, Quezon City

REQUEST FOR QUOTATION

2020-0050

SEALED CANVASS

February 26, 2020 PHILGEPSS REF. NO.: 6912189

Date DATE POSTED : 3-4-20

POSTED BY : ERIKA

Sir / Madam:

Please furnish us with your quotation on or before **March 10, 2020 @ 5:00PM** for the following items:

No.	Quantity	PARTICULARS	Unit Cost	Total Cost
	29 Items	Supplies and materials for use in SSS Annual Medical and Physical Examination for CY 2020 and for Emergency Use with the following requirements: <i>(Page 3 of 3)</i> GRAND TOTAL ABC = P 156,550.00 HCD – Revised Memo received by PPMD dated 2-26-2020 with Request # 2020-0098 APP FY 2020 - #238, Supplies & Materials (X-Ray – P 230,240.00; Clinical – P 29,550.00; Laboratory – P 150,950.00)		

Delivery Terms : Thirty (30) Calendar Days from receipt of approved Job Order or Purchase Order submission of billing documents.

Payment Terms : Government Terms (Payment is upon delivery of items / services and submission of billing documents.)

Price Validity : Three (3) Months.

- NOTE/S:**
- 1.) **For canvass with an ABC of P 100,000.00 and above**, the winning bidder is required to post a Performance Bond from receipt of Notice of Award equivalent to 5% Cash (Goods & Consulting Services) & 10% Cash (Infrastructure), Cashier's / Manager's Check, Bank Guarantee / Draft or 30% Surety Bond callable upon demand, of the contract price.
 - 2.) **Supplier is required to indicate his PhilGeps Registration Number on the canvass form.**
 - 3.) SSS shall withhold the applicable taxes from the amount payable in accordance with the BIR regulations.
 - 4.) **Alternative offer is not allowed.**
 - 5.) **Quantity is subject to change but not to exceed of the approved P.O.**
 - 6.) **Please specify brand name / model offered.**
 - 7.) **For clarification of details, please call Ms. Beth Coronel (X-ray Items) & Ms. Nette Marcelino (Clinical Items) @ 920-6401 local 5449 & 5444 respectively.**

This is to certify that my Company is updated in the payment of contributions and loans to SSS, and conformed with the above terms & conditions, and the data / quotation indicated are valid.

Owner/Company Representative
 (Sign over Printed Name)

Reminder : Price quotation should be made with extra care taking into account the specification and unit of quantity to avoid errors. The offeror binds himself to this quotation.

Please indicate below your Business Name, Address and Telephone Number and Date Received.

Your Business SSS No. _____

PhilGeps Registration No. _____

T I N no. _____

Date Received : _____

 (Business Name)

 (Address & Telephone No.)

 (E-mail Address)

Very Truly Yours,

Hydee R. Raquid
HYDEE R. RAQUID

Department Manager III

Procurement, Planning & Management Department

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