



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0465**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245** or **8562-53-38** or email address at jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph.

EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2 *2/21*

INSTRUCTIONS:

1. Accomplish this RFQ correctly and accurately.
2. Do not alter the contents of this form in any way.
3. All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
4. Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-02-1203 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Tobramycin Eye Ointment: 0.3%, 3.5g tube				174.90	50 tubes		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



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REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0465

TERMS AND CONDITIONS:

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2. Price quotation/s must be valid for a period of **thirty (30) calendar days** from the date of the receipt of Purchase Order/ Job Order.
3. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties, and/ or levies payable.
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Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



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REQUEST FOR QUOTATION

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RFQ No.: **HBAC-A2-2023-02-0466**

NAME OF COMPANY: _____

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TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

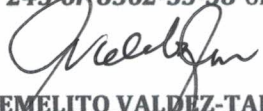
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After having carefully read and accepted the Terms and Conditions, I/ We submit our quotation/s for the item/s as follows:

PR. No.: 2023-02-1204 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Propylthiouracil 50mg tablet				13.00	100 tablets		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



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Department of Health
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REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0467**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

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Chairman, HBAC-A-2 *at 2/21*

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

PR. No.: 2023-02-1242 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Linezolid 2mg/ml, (600mg/300ml), solution for infusion (IV)				4,152.50	30 bags		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: **7 working days**

NOTE: **MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER**



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REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0467

TERMS AND CONDITIONS:

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REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0468**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

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Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

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EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2

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

PR. No.: 2023-02-1286 (BAC SEC)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Cloxacillin Oral: 500mg (blister pack)				11.00	20 capsules		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



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REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0468

TERMS AND CONDITIONS:

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REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0469**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

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Chairman, HBAC-A-2

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

PR. No.: 2023-02-1286 (BAC SEC)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Diphenhydramine Oral: 50mg (blister pack)				3.50	20 tablets		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



Republic of the Philippines
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REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0469

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REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0470**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

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Chairman, HBAC-A-2

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

PR. No.: 2023-02-1286 (BAC SEC)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Loperamide (as hydrochloride) Oral: 2mg (blister pack)				3.80	20 capsules		

TERMS OF PAYMENT: (Please check one)

- Terms/ Deferred Payment
 Cheque upon Delivery (COD)
Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



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REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0470

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REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0471**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

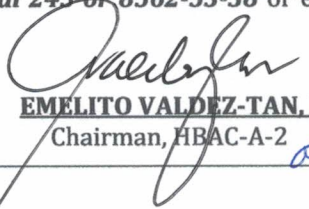
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PR. No.: 2023-02-1286 (BAC SEC)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Mefenamic Acid Oral: 500mg (in blister pack)				4.00	20 tablets/ capsules		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



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Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0471

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REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0472**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

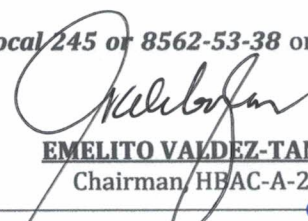
Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245 or 8562-53-38** or email address at **jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph**


EMELITO VALDEZ-TAN, M.D.
Chairman/HBAC-A-2

INSTRUCTIONS:

1. Accomplish this RFQ correctly and accurately.
2. Do not alter the contents of this form in any way.
3. All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
4. Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-02-1257 (Geriatric Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Carbamazepine 200mg tablet				2.25	200 tablets		

TERMS OF PAYMENT: (Please check one)

- Terms/ Deferred Payment
 Cheque upon Delivery (COD)
Note: No Clearing time before the delivery

DELIVERY PERIOD: **7 working days**

NOTE: **MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER**



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0472

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of **thirty (30) calendar days** from the date of the receipt of Purchase Order/ Job Order.
3. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties, and/ or levies payable.
4. Award of the contract shall be made to the lowest quotation (for goods and infrastructure) or, the highest-rated offer (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
5. Any interlineations, erasures, or overwriting shall be valid only if they are signed or initialed by you or any of your duly authorized representative/s.
6. The item/s shall be delivered according to the requirements specified in the Technical Specifications.
7. JRRMMC shall have the right to inspect and/or to test the goods to confirm their conformity to the technical specifications.
8. The committee reserves the right to reject any and all bids, declare a failure of bidding any time prior to the contract award, or not to award the contract, without thereby incurring any liability, and make no assurance that a contract shall be entered into as a result of the bidding.

Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0473**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245 or 8562-53-38** or email address at **jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph**.


EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2

INSTRUCTIONS:

- Accomplish this RFQ correctly and accurately.
- Do not alter the contents of this form in any way.
- All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
- Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-02-1260 (Geriatric Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Enalapril Oral: 5mg tablet (as maleate)				8.70	600 tablets		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0473

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of **thirty (30) calendar days** from the date of the receipt of Purchase Order/ Job Order.
3. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties, and/ or levies payable.
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Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0474

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ <i>Certificate of Product Registration (CPR)</i>	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245 or 8562-53-38** or email address at **jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph**.


EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2

INSTRUCTIONS:

- Accomplish this RFQ correctly and accurately.
- Do not alter the contents of this form in any way.
- All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
- Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-02-1111 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Lithium Carbonate 450mg MR tablet				4.76	200 tablets		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0474

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of **thirty (30) calendar days** from the date of the receipt of Purchase Order/ Job Order.
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Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0475**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

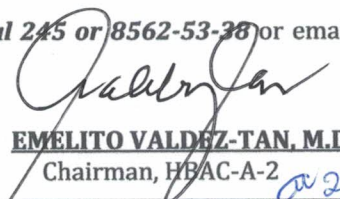
Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245 or 8562-53-38** or email address at **jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph**


EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2 *ca 2/21*

INSTRUCTIONS:

- Accomplish this RFQ correctly and accurately.
- Do not alter the contents of this form in any way.
- All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
- Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-01-0961 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Antitetanus Serum Inj.: 1500 IU/ml, 0.7ml ampule (IM)				66.00	1000 ampules		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0475

TERMS AND CONDITIONS:

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Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0476**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245 or 8562-53-38** or email address at **jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph**

EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2

INSTRUCTIONS:

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3. All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
4. Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-02-1133 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Calcium Carbonate + Cholecalciferol (Vit. D3) 500mg elemental Ca + 400 IU Vit. D3 Tablet				5.01	1000 tablets		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0476

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of **thirty (30) calendar days** from the date of the receipt of Purchase Order/ Job Order.
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Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0477**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245 or 8562-53-38** or email address at jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph.


EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2

INSTRUCTIONS:

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2. Do not alter the contents of this form in any way.
3. All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
4. Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-02-1108 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Valproic Acid 250mg/5ml syrup, 120ml				420.91	20 bottles		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0477

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of **thirty (30) calendar days** from the date of the receipt of Purchase Order/ Job Order.
3. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties, and/ or levies payable.
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Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0478**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

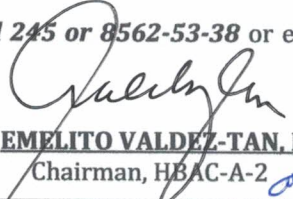
Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

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Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245 or 8562-53-38** or email address at jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph.


EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2 *02/21*

INSTRUCTIONS:

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- All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
- Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-02-1112 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Prednisone 10mg/5ml suspension, 60ml				115.00	10 bottles		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0478

TERMS AND CONDITIONS:

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Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0479**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

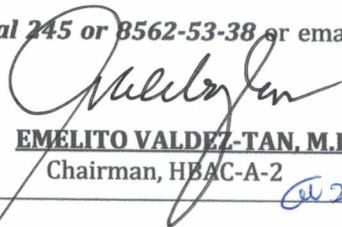
Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245 or 8562-53-38** or email address at jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph.


EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2

INSTRUCTIONS:

- Accomplish this RFQ correctly and accurately.
- Do not alter the contents of this form in any way.
- All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
- Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-02-1115 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Mecobalamin 500mcg tablet				13.20	400 tablets		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0479

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of **thirty (30) calendar days** from the date of the receipt of Purchase Order/ Job Order.
3. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties, and/ or levies payable.
4. Award of the contract shall be made to the lowest quotation (for goods and infrastructure) or, the highest-rated offer (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
5. Any interlineations, erasures, or overwriting shall be valid only if they are signed or initialed by you or any of your duly authorized representative/s.
6. The item/s shall be delivered according to the requirements specified in the Technical Specifications.
7. JRRMMC shall have the right to inspect and/or to test the goods to confirm their conformity to the technical specifications.
8. The committee reserves the right to reject any and all bids, declare a failure of bidding any time prior to the contract award, or not to award the contract, without thereby incurring any liability, and make no assurance that a contract shall be entered into as a result of the bidding.

Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0480**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245 or 8562-53-38** or email address at **jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph**.


EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2

INSTRUCTIONS:

- Accomplish this RFQ correctly and accurately.
- Do not alter the contents of this form in any way.
- All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
- Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-02-1116 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Multivitamins per 1ml, 15ml Drops				51.62	10 bottles		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0480

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of *thirty (30) calendar days* from the date of the receipt of Purchase Order/ Job Order.
3. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties, and/ or levies payable.
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Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0481**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245 or 8562-53-38** or email address at **jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph**.


EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2

INSTRUCTIONS:

- Accomplish this RFQ correctly and accurately.
- Do not alter the contents of this form in any way.
- All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
- Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-02-1047 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Ferrous Salt + Folic Acid Oral: 60mg elemental Iron + 400mcg Folic Acid tablet				0.91	1000 tablets		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0481

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of **thirty (30) calendar days** from the date of the receipt of Purchase Order/ Job Order.
3. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties, and/ or levies payable.
4. Award of the contract shall be made to the lowest quotation (for goods and infrastructure) or, the highest-rated offer (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
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Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0482**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245 or 8562-53-38** or email address at jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph.


EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2

INSTRUCTIONS:

- Accomplish this RFQ correctly and accurately.
- Do not alter the contents of this form in any way.
- All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
- Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-02-1048 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Ferrous Sulfate Oral: equivalent to 60mg elemental iron tablet (in blister pack)				2.50	1000 tablets		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: **7 working days**

NOTE: **MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER**



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0482

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of **thirty (30) calendar days** from the date of the receipt of Purchase Order/ Job Order.
3. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties, and/ or levies payable.
4. Award of the contract shall be made to the lowest quotation (for goods and infrastructure) or, the highest-rated offer (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
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Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0483**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245 or 8562-53-38** or email address at **jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph**.


EMELITO VALDEZ TAN, M.D.
Chairman, HBAC-A-2

INSTRUCTIONS:

1. Accomplish this RFQ correctly and accurately.
2. Do not alter the contents of this form in any way.
3. All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
4. Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-02-1049 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Ferrous Sulfate 15mg elemental iron/0.6ml, 15ml drops				23.84	20 bottles		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0483

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of **thirty (30) calendar days** from the date of the receipt of Purchase Order/ Job Order.
3. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties, and/ or levies payable.
4. Award of the contract shall be made to the lowest quotation (for goods and infrastructure) or, the highest-rated offer (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
5. Any interlineations, erasures, or overwriting shall be valid only if they are signed or initialed by you or any of your duly authorized representative/s.
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8. The committee reserves the right to reject any and all bids, declare a failure of bidding any time prior to the contract award, or not to award the contract, without thereby incurring any liability, and make no assurance that a contract shall be entered into as a result of the bidding.

Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0484**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

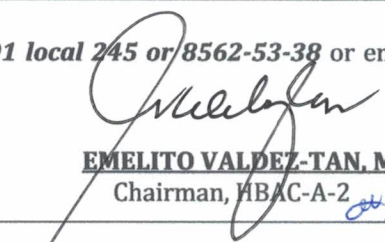
Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ <i>Certificate of Product Registration (CPR)</i>	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245 or 8562-53-38** or email address at **jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph**.


EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2 *2/21*

INSTRUCTIONS:

- Accomplish this RFQ correctly and accurately.
- Do not alter the contents of this form in any way.
- All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
- Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-02-1050 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Multivitamins 5ml syrup, 60ml				50.00	60 bottles		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0484

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of **thirty (30) calendar days** from the date of the receipt of Purchase Order/ Job Order.
3. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties, and/ or levies payable.
4. Award of the contract shall be made to the lowest quotation (for goods and infrastructure) or, the highest-rated offer (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
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Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0485**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245 or 8562-53-38** or email address at **jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph**.


EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2

INSTRUCTIONS:

1. Accomplish this RFQ correctly and accurately.
2. Do not alter the contents of this form in any way.
3. All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
4. Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-01-0684 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Tenofovir disoproxil fumarate 300mg tablet				38.50	200 tablets		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0485

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of **thirty (30) calendar days** from the date of the receipt of Purchase Order/ Job Order.
3. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties, and/ or levies payable.
4. Award of the contract shall be made to the lowest quotation (for goods and infrastructure) or, the highest-rated offer (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
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Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



Republic of the Philippines
 Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0486**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245 or 8562-53-38** or email address at jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph.


EMELITO VALDEZ TAN, M.D.
 Chairman, HBAC-A-2

INSTRUCTIONS:

1. Accomplish this RFQ correctly and accurately.
2. Do not alter the contents of this form in any way.
3. All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
4. Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-02-1132 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Clonazepam 2mg tablet				8.59	200 tablets		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0486

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of **thirty (30) calendar days** from the date of the receipt of Purchase Order/ Job Order.
3. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties, and/ or levies payable.
4. Award of the contract shall be made to the lowest quotation (for goods and infrastructure) or, the highest-rated offer (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
5. Any interlineations, erasures, or overwriting shall be valid only if they are signed or initialed by you or any of your duly authorized representative/s.
6. The item/s shall be delivered according to the requirements specified in the Technical Specifications.
7. JRRMMC shall have the right to inspect and/or to test the goods to confirm their conformity to the technical specifications.
8. The committee reserves the right to reject any and all bids, declare a failure of bidding any time prior to the contract award, or not to award the contract, without thereby incurring any liability, and make no assurance that a contract shall be entered into as a result of the bidding.

Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0487**

NAME OF COMPANY: _____
COMPANY ADDRESS: _____
TAX IDENTIFICATION NO.: _____
PHILGEPS REGISTRATION NO. (if applicable): _____

Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245** or **8562-53-38** or email address at jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph.


EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2

INSTRUCTIONS:

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- Do not alter the contents of this form in any way.
- All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
- Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-02-1136 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Diazepam Inj.: 5mg/ml, 2ml ampule IM,IV				138.22	100 ampules		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0487

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of **thirty (30) calendar days** from the date of the receipt of Purchase Order/ Job Order.
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Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



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Department of Health
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BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0488**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

For any clarification/s, you may contact us at the telephone no. **8711-94-91 local 245 or 8562-53-38** or email address at jrrmmc_bacsec@yahoo.com & bacsec@jrrmmc.gov.ph.


EMELITO VALDEZ TAN, M.D.
Chairman, HBAC-A-2

INSTRUCTIONS:

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- Do not alter the contents of this form in any way.
- All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
- Failure to follow these instructions will disqualify your entire quotation.

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

PR. No.: 2023-02-1123 (Ophthalmology)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Hydroxypropyl methylcellulose ophthalmic solution 2%				300.00	200 pieces		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0488

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of *thirty (30) calendar days* from the date of the receipt of Purchase Order/ Job Order.
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4. Award of the contract shall be made to the lowest quotation (for goods and infrastructure) or, the highest-rated offer (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
5. Any interlineations, erasures, or overwriting shall be valid only if they are signed or initialed by you or any of your duly authorized representative/s.
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Signature over Printed Name

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Office Telephone/ Fax Number

Email address/es



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BIDS AND AWARDS COMMITTEE

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jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **21 February 2023**

RFQ No.: **HBAC-A2-2023-02-0489**

NAME OF COMPANY: _____
COMPANY ADDRESS: _____
TAX IDENTIFICATION NO.: _____
PHILGEPS REGISTRATION NO. (if applicable): _____

Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 28 February 2023**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
❖ Certificate of Product Registration (CPR)	To be submitted together with this RFQ	

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EMELITO VALDEZ TAN, M.D.
Chairman, HBAC-A-2

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

PR. No.: 2023-01-0901 (IM-Pulmonary Unit)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/UNIT	QTTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Sterile water, injection type, single use only, at least 500ml to 1 liter				200.00	400 pieces		

TERMS OF PAYMENT: (Please check one)

Terms/ Deferred Payment

Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 working days

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF PURCHASE ORDER



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Department of Health
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BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 21 February 2023

RFQ No.: HBAC-A2-2023-02-0489

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
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Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

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