

Republic of the Philippines Department of Health JOSE R. REYES MEMORIAL MEDICAL CENTER

BIDS AND AWARDS COMMITTEE

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

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Jose R. Reyes Memorial attends to procure One (1) roll applementing Rules and Regulation Please quote your best rovided at last page of this representative not later than 18 For any clarification/s, your email address at bacsec@jrrm	Medical HMPC ons of the offer for RFQ. Sultant 20 ou may on the control of the co	ne Report this bmit 123.	Pouch in Pou	in according to the second of	ed herein, sub d duly signed ephone no. 871	ject to the by you o	Terms and r your duly	Conditions authorized
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DC: 8562-5338/8711-9491 loc. 245

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REQUEST FOR QUOTATION

TERMS AND CONDITIONS:

- 1. Bidders shall provide correct and accurate information required in this form.
- 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.
- Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties, and/ or levies payable.
- 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.
- 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.
- The item/s shall be delivered according to the requirements specified in the Technical Specifications (item description).
- JRRMMC shall have the right to inspect and/or to test the goods to confirm their conformity to the technical specifications.
- 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 Prin	ited Name
Position/ Desig	nation
Office Telephone/ Fa	ax Number
Email address	s/es