



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: 23 April 2024

RFQ No.: HBAC-A2-2024-04-1623

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____


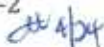
Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

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 30 April 2024**.

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

Document	Deadline	Remarks
❖ Updated Certificate of Product Registration (CPR)	To be submitted together with this RFQ	
❖ Certificate of Good Manufacturing Practices from FDA		
❖ If the supplier is not the manufacturer, certification from the manufacturer that the supplier is an authorized distributor/dealer of the product/items		
❖ License to Operate from FDA with List of Sources (whether it is a manufacturer, importer, seller or distributor)		
❖ Expired or Initial Certificate of Product Registration (CPR) or Certification from at least three (3) Tertiary Government or Private hospital that the product has been successfully used with no reported adverse effects (for item below two years in the local market)		

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.

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

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1623**

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

PR. No.: 2024-04-2663 (Dialysis Center)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Various peritoneal dialysis must be compatible to existing transfer sets and solutions							
Peritoneal Dialysis Solution with 1.5% Dextrose, 2L, 6 per box				1,308.00	106 boxes		
Peritoneal Dialysis Solution with 2.5% Dextrose, 2L, 6 per box				1,308.00	30 boxes		
Peritoneal Dialysis Solution with 4.5% Dextrose, 2L, 6 per box				1,308.00	16 boxes		

TERMS OF PAYMENT:

_____ Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

- 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.
- 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.

JOSE R. REYES MEMORIAL MEDICAL CENTER
HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: EMELITO O. VALDEZ-TAN, MD
Vice Chairperson: ARLIE FELVIN GACIAS
Members:
ZHARLAH GULMATICO-FLORES, MD
JOSEPH T. GATCHALIAN, RN
NATIVIDAD SARMIENTO
Alternate Member: _____

Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



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BIDS AND AWARDS COMMITTEE

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REQUEST FOR QUOTATION

Date: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1624**

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.

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Document	Deadline	Remarks
❖ <i>Updated Certificate of Product Registration (CPR)</i>	To be submitted together with this RFQ	
❖ <i>Certificate of Good Manufacturing Practices from FDA</i>		
❖ <i>If the supplier is not the manufacturer, certification from the manufacturer that the supplier is an authorized distributor/dealer of the product/items</i>		
❖ <i>License to Operate from FDA with List of Sources (whether it is a manufacturer, importer, seller or distributor)</i>		
❖ <i>Expired or Initial Certificate of Product Registration (CPR) or Certification from at least three (3) Tertiary Government or Private hospital that the product has been successfully used with no reported adverse effects (for item below two years in the local market)</i>		

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.

For: 
EMELITO VALDEZ-TAN, M.D.
 Chairman, HBAC-A-2 *200 4/24*

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

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1624**

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

PR. No.: 2024-04-2566 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Cilostazol Oral: 50mg tablet				8.94	200 tablets		

TERMS OF PAYMENT:

_____ Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

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JOSE R. REYES MEMORIAL MEDICAL CENTER
HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: EMELITO O. VALDEZ-TAN, MD
Vice Chairperson: ARLIE FELVIN GACIAS
Members:
ZHARLAH GULMATICO-FLORES, MD
JOSEPH T. GATCHALIAN, RN
NATIVIDAD SARMIENTO
Alternate Member: _____

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

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REQUEST FOR QUOTATION

Date: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1625**

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

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for **EMELITO VALDEZ-TAN, M.D.**
Chairman, HBAC-A-2 *et al*

INSTRUCTIONS:

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jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1625**

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

PR. No.: 2024-04-2567 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Cilostazol Oral: 100mg tablet				14.40	200 tablets		

TERMS OF PAYMENT:

____ Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

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TERMS AND CONDITIONS:

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JOSE R. REYES MEMORIAL MEDICAL CENTER
HOSPITAL BIDS AND AWARDS COMMITTEE-A2

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Vice Chairperson: ARLIE FELVIN GACIAS
Members:
ZHARLAH GULMATICO-FLORES, MD
JOSEPH T. GATCHALIAN, RN
NATIVIDAD SARMIENTO
Alternate Member: _____

Signature over Printed Name

Position/ Designation

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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1626**

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

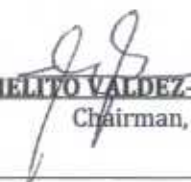
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for  **EMELITO VALDEZ-TAN, M.D.**
Chairman, HBAC-A-2 20/4/24

INSTRUCTIONS:

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BIDS AND AWARDS COMMITTEE

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

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **23 April 2024**
 RFQ No.: **HBAC-A2-2024-04-1626**

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

PR. No.: 2024-04-2604 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Bupivacaine 0.5%, 4ml vial (spinal) with 8% dextrose (as hydrochloride)				88.64	500 vials		

TERMS OF PAYMENT:
 _____ Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

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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.
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JOSE R. REYES MEMORIAL MEDICAL CENTER
 HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
 Vice Chairperson: **ARLIE FELVIN GACIAS** _____
 Members:
ZHARLAH GULMATICO-FLORES, MD _____
JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
 Alternate Member: _____

Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es



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BIDS AND AWARDS COMMITTEE

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

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1627**

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



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

INSTRUCTIONS:

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REQUEST FOR QUOTATION

Date: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1628**

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


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FOR  **EMELITO VALDEZ-TAN, M.D.**
Chairman, HBAC-A-2 *2024/4/24*

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REQUEST FOR QUOTATION

Date: 23 April 2024

RFQ No.: HBAC-A2-2024-04-1629

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

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Fd:  **EMELITO VALEDEZ-TAN, M.D.**
 Chairman, HBAC-A-2 *at 4/24*

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REQUEST FOR QUOTATION

Date: 23 April 2024
RFQ No.: HBAC-A2-2024-04-1629

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

PR. No.: 2024-04-2555 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Carboxymethylcellulose eye drops, 0.5%, 15ml				450.00	100 bottles		

TERMS OF PAYMENT:

 Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

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JOSE R. REYES MEMORIAL MEDICAL CENTER
HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
 Vice Chairperson: **ARLIE FELVIN GACIAS** _____
 Members:
ZHARLAH GULMATICO-FLORES, MD _____
JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
 Alternate Member: _____

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: 23 April 2024

RFQ No.: HBAC-A2-2024-04-1630

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 30 April 2024**.

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

Document	Deadline	Remarks
❖ Updated Certificate of Product Registration (CPR)	To be submitted together with this RFQ	
❖ Certificate of Good Manufacturing Practices from FDA		
❖ If the supplier is not the manufacturer, certification from the manufacturer that the supplier is an authorized distributor/dealer of the product/items		
❖ License to Operate from FDA with List of Sources (whether it is a manufacturer, importer, seller or distributor)		
❖ Expired or Initial Certificate of Product Registration (CPR) or Certification from at least three (3) Tertiary Government or Private hospital that the product has been successfully used with no reported adverse effects (for item below two years in the local market)		

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.

for:  **EMELITO VALDEZ-TAN, M.D.**
Chairman, HBAC-A-2 *4/24*

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.



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: 23 April 2024
RFQ No.: HBAC-A2-2024-04-1630

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

PR. No.: 2024-04-2556 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Cefalexin 500mg capsule				5.35	200 capsules		

TERMS OF PAYMENT:

 Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

- 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.
- 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.

JOSE R. REYES MEMORIAL MEDICAL CENTER
HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
Vice Chairperson: **ARLIE FELVIN GACIAS** _____
Members:
ZHARLAH GULMATICO-FLORES, MD _____
JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
Alternate Member: _____

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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1631**

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 30 April 2024**.

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

Document	Deadline	Remarks
❖ Updated Certificate of Product Registration (CPR)	To be submitted together with this RFQ	
❖ Certificate of Good Manufacturing Practices from FDA		
❖ If the supplier is not the manufacturer, certification from the manufacturer that the supplier is an authorized distributor/dealer of the product/items		
❖ License to Operate from FDA with List of Sources (whether it is a manufacturer, importer, seller or distributor)		
❖ Expired or Initial Certificate of Product Registration (CPR) or Certification from at least three (3) Tertiary Government or Private hospital that the product has been successfully used with no reported adverse effects (for item below two years in the local market)		

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.

for: 
EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2 *at 4/24*

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.



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: 23 April 2024

RFQ No.: HBAC-A2-2024-04-1632

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 30 April 2024**.

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

Document	Deadline	Remarks
❖ Updated Certificate of Product Registration (CPR)	To be submitted together with this RFQ	
❖ Certificate of Good Manufacturing Practices from FDA		
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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.

FOR: 
EMELITO VALDEZ-TAN, M.D.
 Chairman, HBAC-A-2 *at 4/24*

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.



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: **23 April 2024**
 RFQ No.: **HBAC-A2-2024-04-1632**

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

PR. No.: 2024-04-2565 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Celecoxib Oral: 200mg capsules				9.80	3200 capsules		

TERMS OF PAYMENT:

 Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

- 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.
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- JRRMMC shall have the right to inspect and/or to test the goods to confirm their conformity to the technical specifications.
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JOSE R. REYES MEMORIAL MEDICAL CENTER
 HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
 Vice Chairperson: **ARLIE FELVIN GACIAS** _____
 Members:
ZHARLAH GULMATICO-FLORES, MD _____
JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
 Alternate Member: _____

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: 23 April 2024

RFQ No.: HBAC-A2-2024-04-1633

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 30 April 2024**.

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

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

For: 
EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2 *24/4/24*

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.



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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1633**

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

PR. No.: 2024-04-2558 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Ceftazidime Inj.: 1g vial				32.98	3400 vials		

TERMS OF PAYMENT:

 Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

- 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.
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JOSE R. REYES MEMORIAL MEDICAL CENTER
HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
Vice Chairperson: **ARLIE FELVIN GACIAS** _____
Members:
ZHARLAH GULMATICO-FLORES, MD _____
JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
Alternate Member: _____

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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1634**

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

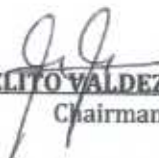
Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

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 30 April 2024**.

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

Document	Deadline	Remarks
❖ Updated Certificate of Product Registration (CPR)	To be submitted together with this RFQ	
❖ Certificate of Good Manufacturing Practices from FDA		
❖ If the supplier is not the manufacturer, certification from the manufacturer that the supplier is an authorized distributor/dealer of the product/items		
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❖ Expired or Initial Certificate of Product Registration (CPR) or Certification from at least three (3) Tertiary Government or Private hospital that the product has been successfully used with no reported adverse effects (for item below two years in the local market)		

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.

for: 
EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2 *23/4/24*

INSTRUCTIONS:

- Accomplish this RFQ correctly and accurately.
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- Failure to follow these instructions will disqualify your entire quotation.



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: **23 April 2024**
 RFQ No.: **HBAC-A2-2024-04-1634**

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

PR. No.: 2024-04-2564 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Cefuroxime 250mg/5mL, 50mL Oral Suspension Bottle				141.90	10 bottles		

TERMS OF PAYMENT:

_____ Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

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JOSE R. REYES MEMORIAL MEDICAL CENTER
 HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
 Vice Chairperson: **ARLIE FELVIN GACIAS** _____
 Members:
ZHARLAH GULMATICO-FLORES, MD _____
JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
 Alternate Member: _____

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: 23 April 2024

RFQ No.: HBAC-A2-2024-04-1635

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 30 April 2024**.

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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.

for: 
EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2 *2024/4/24*

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.



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: **23 April 2024**
RFQ No.: **HBAC-A2-2024-04-1635**

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

PR. No.: 2024-04-2551 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Ceftriaxone Inj.: 1g vial + 10mL diluent IV				149.50	944 vials		

TERMS OF PAYMENT:

 Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

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JOSE R. REYES MEMORIAL MEDICAL CENTER
HOSPITAL BIDS AND AWARDS COMMITTEE-AZ

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
Vice Chairperson: **ARLIE FELVIN GACIAS** _____
Members:
ZHARLAH GULMATICO-FLORES, MD _____
JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
Alternate Member: _____

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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1636**

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.

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Document	Deadline	Remarks
❖ Updated Certificate of Product Registration (CPR)	To be submitted together with this RFQ	
❖ Certificate of Good Manufacturing Practices from FDA		
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for: 
EMELITO VALDEZ-TAN, M.D.
 Chairman, HBAC-A-2 *April 24*

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.



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: **23 April 2024**
 RFQ No.: **HBAC-A2-2024-04-1636**

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

PR. No.: 2024-04-2552 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Mannitol Inj.: 20%, 500mL bottle				100.80	1280 bottles		

TERMS OF PAYMENT:

_____ Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

- 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.
- 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.

JOSE R. REYES MEMORIAL MEDICAL CENTER
 HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
 Vice Chairperson: **ARLIE FELVIN GACIAS** _____
 Members:
ZHARLAH GULMATICO-FLORES, MD _____
JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
 Alternate Member: _____

 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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1637**

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 30 April 2024**.

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

Document	Deadline	Remarks
❖ Updated Certificate of Product Registration (CPR)	To be submitted together with this RFQ	
❖ Certificate of Good Manufacturing Practices from FDA		
❖ If the supplier is not the manufacturer, certification from the manufacturer that the supplier is an authorized distributor/dealer of the product/items		
❖ License to Operate from FDA with List of Sources (whether it is a manufacturer, importer, seller or distributor)		
❖ Expired or Initial Certificate of Product Registration (CPR) or Certification from at least three (3) Tertiary Government or Private hospital that the product has been successfully used with no reported adverse effects (for item below two years in the local market)		

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.

for 
EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2 *24/4/24*

INSTRUCTIONS:

- Accomplish this RFQ correctly and accurately.
- Do not alter the contents of this form in any way.
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- Failure to follow these instructions will disqualify your entire quotation.



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_barsec@yahoo.com

REQUEST FOR QUOTATION

Date: **23 April 2024**
 RFQ No.: **HBAC-A2-2024-04-1637**

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

PR. No.: 2024-04-2549 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Normal Saline Solution 1000mL (0.9% Sodium Chloride)				35.00	25,224 bottles		

TERMS OF PAYMENT:

Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

- Bidders shall provide correct and accurate information required in this form.
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JOSE R. REYES MEMORIAL MEDICAL CENTER
 HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
 Vice Chairperson: **ARLIE FELVIN GACIAS** _____
 Members:
ZHARLAH GULMATICO-FLORES, MD _____
JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
 Alternate Member: _____

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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1638**

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 30 April 2024**.

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

Document	Deadline	Remarks
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❖ Certificate of Good Manufacturing Practices from FDA		
❖ If the supplier is not the manufacturer, certification from the manufacturer that the supplier is an authorized distributor/dealer of the product/items		
❖ License to Operate from FDA with List of Sources (whether it is a manufacturer, importer, seller or distributor)		
❖ Expired or Initial Certificate of Product Registration (CPR) or Certification from at least three (3) Tertiary Government or Private hospital that the product has been successfully used with no reported adverse effects (for item below two years in the local market)		

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.

For **EMELITO VALDEZ-TAN, M.D.**
 Chairman, HBAC-A-2 *24/4/24*

- INSTRUCTIONS:**
- Accomplish this RFQ correctly and accurately.
 - Do not alter the contents of this form in any way.
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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: **23 April 2024**
 RFQ No.: **HBAC-A2-2024-04-1638**

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

PR. No.: 2024-04-2549 (Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Dextrose 5% Lactated Ringers 1000ml bottle				39.00	4848 bottles		

TERMS OF PAYMENT:

 Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

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JOSE R. REYES MEMORIAL MEDICAL CENTER
 HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
 Vice Chairperson: **ARLIE FELVIN GACIAS** _____
 Members:
ZHARLAH GULMATICO-FLORES, MD _____
JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
 Alternate Member: _____

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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1639**

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

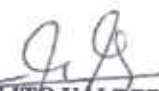
Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

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 30 April 2024**.

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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.

for: 
EMELITO VALDEZ-TAN, M.D.
 Chairman, HBAC-A-2 *4/24*

INSTRUCTIONS:

1. Accomplish this RFQ correctly and accurately.
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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: **23 April 2024**
 RFQ No.: **HBAC-A2-2024-04-1639**

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

PR. No.: 2024-04-2570 (Geriatric Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Clindamycin Inj., 150mg/mL, 4mL ampule				52.89	100 ampules		

TERMS OF PAYMENT:

 Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

- TERMS AND CONDITIONS:**
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**JOSE R. REYES MEMORIAL MEDICAL CENTER
 HOSPITAL BIDS AND AWARDS COMMITTEE-A2**

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
 Vice Chairperson: **ARLIE FELVIN GACIAS** _____
 Members:
ZHARLAH GULMATICO-FLORES, MD _____
JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
 Alternate Member: _____

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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1640**

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


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❖ If the supplier is not the manufacturer, certification from the manufacturer that the supplier is an authorized distributor/dealer of the product/items		
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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.

FOR: 
EMELITO VALDEZ-TAN, M.D.
 Chairman, HBAC-A-2 *23/4/24*

- INSTRUCTIONS:**
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BIDS AND AWARDS COMMITTEE

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

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: **23 April 2024**
 RFQ No.: **HBAC-A2-2024-04-1640**

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

PR. No.: 2024-04-2571 (Geriatric Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Cloxacillin 500mg capsule				6.90	600 capsules		

TERMS OF PAYMENT:
 _____ Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

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JOSE R. REYES MEMORIAL MEDICAL CENTER
 HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: EMELITO O. VALDEZ-TAN, MD _____
 Vice Chairperson: ARLIE FELVIN GACIAS _____
 Members:
 ZHARLAH GULMATICO-FLORES, MD _____
 JOSEPH T. GATCHALIAN, RN _____
 NATIVIDAD SARMIENTO _____
 Alternate Member: _____

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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1641**

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.

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Document	Deadline	Remarks
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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.

for: 
EMELITO VALDEZ-TAN, M.D.
 Chairman, HBAC-A-2 *23 4/24*

- INSTRUCTIONS:**
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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: **23 April 2024**
 RFQ No.: **HBAC-A2-2024-04-1641**

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

PR. No.: 2024-04-2573 (Geriatric Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Co-Amoxiclav (Amoxicillin + Potassium Clavulanate) Oral: 500mg + 125mg tablet				6.64	1200 tablets		

TERMS OF PAYMENT:
 _____ Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

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JOSE R. REYES MEMORIAL MEDICAL CENTER
 HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
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JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
 Alternate Member: _____

 Signature over Printed Name

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Republic of the Philippines
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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1642**

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


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❖ License to Operate from FDA with List of Sources (whether it is a manufacturer, importer, seller or distributor)		
❖ Expired or Initial Certificate of Product Registration (CPR) or Certification from at least three (3) Tertiary Government or Private hospital that the product has been successfully used with no reported adverse effects (for item below two years in the local market)		

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.

For  **EMELITO VALDEZ-TAN, M.D.**
Chairman, HBAC-A-2 *at 4/24*

- 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.



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: **23 April 2024**
RFQ No.: **HBAC-A2-2024-04-1642**

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

PR. No.: 2024-04-2579 (Geriatric Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Fenofibrate 160mg tablet				27.83	15,000 tablets		

TERMS OF PAYMENT:
_____ Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

- 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.
- 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.

JOSE R. REYES MEMORIAL MEDICAL CENTER
HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
Vice Chairperson: **ARLIE FELVIN GACIAS** _____
Members:
ZHARLAH GULMATICO-FLORES, MD _____
JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
Alternate Member: _____

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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1643**

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

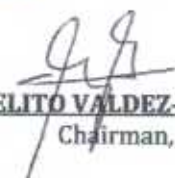
Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

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 30 April 2024**.

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

Document	Deadline	Remarks
❖ Updated Certificate of Product Registration (CPR)	To be submitted together with this RFQ	
❖ Certificate of Good Manufacturing Practices from FDA		
❖ If the supplier is not the manufacturer, certification from the manufacturer that the supplier is an authorized distributor/dealer of the product/items		
❖ License to Operate from FDA with List of Sources (whether it is a manufacturer, importer, seller or distributor)		
❖ Expired or Initial Certificate of Product Registration (CPR) or Certification from at least three (3) Tertiary Government or Private hospital that the product has been successfully used with no reported adverse effects (for item below two years in the local market)		

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.

for: 
EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2 *11/24*

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.



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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1643**

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

PR. No.: 2024-04-2577 (Geriatric Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Enalapril Oral: 5mg tablet (as maleate)				8.00	3,000 tablets		

TERMS OF PAYMENT:

_____ Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

- 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.
- 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.

JOSE R. REYES MEMORIAL MEDICAL CENTER
HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Signature over Printed Name

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
Vice Chairperson: **ARLIE FELVIN GACIAS** _____
Members:
ZHARLAH GULMATICO-FLORES, MD _____
JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
Alternate Member: _____

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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1644**

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 30 April 2024**.

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

Document	Deadline	Remarks
❖ Updated Certificate of Product Registration (CPR)	To be submitted together with this RFQ	
❖ Certificate of Good Manufacturing Practices from FDA		
❖ If the supplier is not the manufacturer, certification from the manufacturer that the supplier is an authorized distributor/dealer of the product/items		
❖ License to Operate from FDA with List of Sources (whether it is a manufacturer, importer, seller or distributor)		
❖ Expired or Initial Certificate of Product Registration (CPR) or Certification from at least three (3) Tertiary Government or Private hospital that the product has been successfully used with no reported adverse effects (for item below two years in the local market)		

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.

for: 
EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2 *24/4/24*

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.



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: **23 April 2024**
RFQ No.: **HBAC-A2-2024-04-1644**

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

PR. No.: 2024-04-2587 (Geriatric Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Loratadine 10mg tablet				1.64	200 tablets		

TERMS OF PAYMENT:

 Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

- 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.
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JOSE R. REYES MEMORIAL MEDICAL CENTER
HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
Vice Chairperson: **ARLIE FELVIN GACIAS** _____
Members:
ZHARLAH GULMATICO-FLORES, MD _____
JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
Alternate Member: _____

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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1645**

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 30 April 2024**.

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

Document	Deadline	Remarks
❖ Updated Certificate of Product Registration (CPR)	To be submitted together with this RFQ	
❖ Certificate of Good Manufacturing Practices from FDA		
❖ If the supplier is not the manufacturer, certification from the manufacturer that the supplier is an authorized distributor/dealer of the product/items		
❖ License to Operate from FDA with List of Sources (whether it is a manufacturer, importer, seller or distributor)		
❖ Expired or Initial Certificate of Product Registration (CPR) or Certification from at least three (3) Tertiary Government or Private hospital that the product has been successfully used with no reported adverse effects (for item below two years in the local market)		

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.

FOR: 
EMELITO VALDEZ-TAN, M.D.
 Chairman, HBAC-A-2 *24/4/24*

- 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.



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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1645**

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

PR. No.: 2024-04-2583 (Geriatric Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Finasteride 5mg tablet				8.05	12,000 tablets		

TERMS OF PAYMENT:

 Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

- Bidders shall provide correct and accurate information required in this form.
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JOSE R. REYES MEMORIAL MEDICAL CENTER
HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
Vice Chairperson: **ARLIE FELVIN GACIAS** _____
Members:
ZHARLAH GULMATICO-FLORES, MD _____
JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
Alternate Member: _____

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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1646**

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 30 April 2024**.

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

Document	Deadline	Remarks
❖ Updated Certificate of Product Registration (CPR)	To be submitted together with this RFQ	
❖ Certificate of Good Manufacturing Practices from FDA		
❖ If the supplier is not the manufacturer, certification from the manufacturer that the supplier is an authorized distributor/dealer of the product/items		
❖ License to Operate from FDA with List of Sources (whether it is a manufacturer, importer, seller or distributor)		
❖ Expired or Initial Certificate of Product Registration (CPR) or Certification from at least three (3) Tertiary Government or Private hospital that the product has been successfully used with no reported adverse effects (for item below two years in the local market)		

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.

for: 
EMELITO VALDEZ-TAN, M.D.
Chairman, HBAC-A-2 *dlm*

- INSTRUCTIONS:**
- Accomplish this RFQ correctly and accurately.
 - Do not alter the contents of this form in any way.
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 - Failure to follow these instructions will disqualify your entire quotation.



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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1646**

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

PR. No.: 2024-04-2593 (Geriatric Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Paracetamol Oral: 500mg tablet				2.00	10,000 tablets		

TERMS OF PAYMENT:

_____ Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

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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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.
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JOSE R. REYES MEMORIAL MEDICAL CENTER
HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: EMELITO O. VALDEZ-TAN, MD
Vice Chairperson: ARLIE FELVIN GACIAS
Members:
ZHARLAH GULMATICO-FLORES, MD
JOSEPH T. GATCHALIAN, RN
NATIVIDAD SARMIENTO
Alternate Member: _____

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: 23 April 2024

RFQ No.: HBAC-A2-2024-04-1647

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

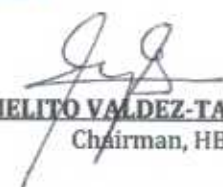
Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure Drugs and Medicine in accordance with section 53.9 of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

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 30 April 2024**.

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

Document	Deadline	Remarks
❖ Updated Certificate of Product Registration (CPR)	To be submitted together with this RFQ	
❖ Certificate of Good Manufacturing Practices from FDA		
❖ If the supplier is not the manufacturer, certification from the manufacturer that the supplier is an authorized distributor/dealer of the product/items		
❖ License to Operate from FDA with List of Sources (whether it is a manufacturer, importer, seller or distributor)		
❖ Expired or Initial Certificate of Product Registration (CPR) or Certification from at least three (3) Tertiary Government or Private hospital that the product has been successfully used with no reported adverse effects (for item below two years in the local market)		

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.

for: 
EMELITO VALDEZ-TAN, M.D.
 Chairman, HBAC-A-2 *4/24*

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.



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: **23 April 2024**
RFQ No.: **HBAC-A2-2024-04-1647**

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

PR. No.: 2024-04-2593 (Geriatric Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Sambong Oral: 500mg tablet				5.05	18,000 tablets		

TERMS OF PAYMENT:

 Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

- 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.
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- JRRMMC shall have the right to inspect and/or to test the goods to confirm their conformity to the technical specifications.
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JOSE R. REYES MEMORIAL MEDICAL CENTER
HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
Vice Chairperson: **ARLIE FELVIN GACIAS** _____
Members:
ZHARLAN GULMATICO-FLORES, MD _____
JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
Alternate Member: _____

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: **23 April 2024**

RFQ No.: **HBAC-A2-2024-04-1648**

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 30 April 2024**.

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

Document	Deadline	Remarks
❖ Updated Certificate of Product Registration (CPR)	To be submitted together with this RFQ	
❖ Certificate of Good Manufacturing Practices from FDA		
❖ If the supplier is not the manufacturer, certification from the manufacturer that the supplier is an authorized distributor/dealer of the product/items		
❖ License to Operate from FDA with List of Sources (whether it is a manufacturer, importer, seller or distributor)		
❖ Expired or Initial Certificate of Product Registration (CPR) or Certification from at least three (3) Tertiary Government or Private hospital that the product has been successfully used with no reported adverse effects (for item below two years in the local market)		

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.

FCR:  **EMELITO VALDEZ-TAN, M.D.**
Chairman, HBAC-A-2 *4/24*

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.



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: 23 April 2024

RFQ No.: HBAC-A2-2024-04-1648

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

PR. No.: 2024-04-2568 (Geriatric Pharmacy)

Technical Specifications (ITEM DESCRIPTION)	VAT - EXEMPT		Remarks	ABC/ UNIT	QTY	BID OFFER/ UNIT	TOTAL
	Y	N					
Cetirizine 10mg tablet				0.39	600 tablets		

TERMS OF PAYMENT:

 Terms/ Deferred Payment

DELIVERY PERIOD: AS CALLED FOR

NOTE: MUST HAVE AVAILABLE STOCKS WITHIN SEVEN (7) DAYS AFTER RECEIPT OF LETTER REQUEST FOR DELIVERY (LRD)

TERMS AND CONDITIONS:

- 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.
- 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.

JOSE R. REYES MEMORIAL MEDICAL CENTER
HOSPITAL BIDS AND AWARDS COMMITTEE-A2

Chairperson: **EMELITO O. VALDEZ-TAN, MD** _____
Vice Chairperson: **ARLIE FELVIN GACIAS** _____
Members:
ZHARLAH GULMATICO-FLORES, MD _____
JOSEPH T. GATCHALIAN, RN _____
NATIVIDAD SARMIENTO _____
Alternate Member: _____

Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es