

**Bid Notice Abstract**

Request for Quotation (RFQ)

Reference Number 9218290
 Procuring Entity CITY OF PASIG
 Title Supply and Delivery of Various Medical Supplies for the City Health Office
 Area of Delivery Metro Manila

Solicitation Number:	100-22-10-6097	Status	Active
Trade Agreement:	Implementing Rules and Regulations	Associated Components	2
Procurement Mode:	Negotiated Procurement - Small Value Procurement (Sec. 53.9)	Bid Supplements	0
Classification:	Goods	Document Request List	0
Category:	Drugs and Medicines	Date Published	11/11/2022
Approved Budget for the Contract:	PHP 999,000.00	Last Updated / Time	11/11/2022 00:00 AM
Delivery Period:	30 Day/s	Closing Date / Time	15/11/2022 16:00 PM
Client Agency:			
Contact Person:	Rho Depaudhon BAC Secretariat Pasig City Hall, Caruncho Avenue,		

Barangay San Nicolas,
Pasig City
Metro Manila
Philippines 1600
63-2-86431111 Ext.1461

bidsandawards@pasigcity.gov.ph

Description

Items Quantity / Units

- 1 Glucose 350T, 1 box=RI-35 ml x 4, 350 Tests 8 box
- 2 Cholesterol 350T, 1 box = R1-35 ml x 4, 350 tests 8 box
- 3 TG Mono 500T, 1 box = RI - 31 ml x 6, 500 tests 6 box
- 4 Uric Acid 200T, 1 box = R1 -30ml x 2, R2 - 15ml x 1, 200 tests 6 box
- 5 Urea 200T, 1 box = R1-30ml x 2, R2-15ml x 1, 200 tests 7 box
- 6 HDL Direct 180T, 1 box = R1 -25 ml x 2, R2 -9 ml x 2, 100 tests 7 box
- 7 ALAT 200T, 1 box = R1-35 ml x 2, R 2-17.5 ml x 1, 200 tests 7 box
- 8 ASAT 200T, 1 box = R1 - 35 ml x 2, R2-17.5 ml x 1, 200 tests 7 box
- 9 Creatinine Enzymatic 200T, 1 box= R1-28 ml x 2, R2-10 ml x 2, 200 tests 7 box
- 10 Serum HN (Normal) 1 box 5mlx4vials 5 box
- 11 Serum HP (Pathological) 1 box 5mlx4vials 5 box
- 12 Multicalibrator level 1; box 5mlx10vials 3 box
- 13 Multicalibrator level 2; box 5mlx10vials 3 box
- 14 HDL Calibrator 2 ml, 1 bottle per box 4 box
- 15 Wash Solution, 1 box = 160 ml x 4 bots 7 box
- 16 Concentrated Wash Solution, 1 box = 1 liter x 1 bot 7 box
- 17 Halogen Lamp, 12 volts, 20 watts 2 pcs
- 18 Sampling Needle Probe, MC240 sampling needle probe 1 pcs
- 19 Reaction Cuvette, 1 set (8 cuvettes) 2 set

PRICE QUOTATION/S SHOULD BE PRINTED ON COMPANY'S OFFICIAL LETTERHEAD TOGETHER WITH THE FOLLOWING UPDATED DOCUMENTS;

- Mayor's/Business Permit
- PhilGEPS Registration Number
- Income/Business Tax Return
- Accomplished and notarized Omnibus Sworn Statement ([https://www.gppb.gov.ph/assets/forms/Omnibus%20Sworn%20Statement \(Revised\).docx](https://www.gppb.gov.ph/assets/forms/Omnibus%20Sworn%20Statement%20(Revised).docx))
- Proof of Authorization: Secretary's Certificate if corporation, or Special Power Of Attorney, if individual

NOTE:

TO BE SUBMITTED SEALED AND LABELED ON A LONG BROWN ENVELOPE, FOLLOWING THIS FORMAT AS FOLLOWS:

FOR:

ATTY. JOSEPHINE C. LATI-BAGAOISAN
BAC Chairperson

THRU:

ATTY. PONCE MIGUEL D. LOPEZ
Officer In Charge, Procurement Management Office
4th Floor, Pasig City Hall,
Caruncho Avenue,
Pasig City

DATE : _____

COMPANY'S NAME : _____

PhilGEPS REFERENCE NUMBER : _____

PROJECT TITLE : _____

Created by Rho Depaudhon

Date Created 10/11/2022

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