

Republic of the Philippines
Department of Trade and Industry
CENTER FOR INTERNATIONAL TRADE EXPOSITIONS AND MISSIONS
Golden Shell Pavilion, Roxas Blvd. Cor. Gil Puyat Ave., Pasay City

Solicitation No.: CITEM-2020-0177

**REQUEST FOR QUOTATION
(SHOPPING)**

The Center for International Trade Expositions and Missions (CITEM) invites all interested parties to submit quotation for:

PURCHASE OF MEDICAL KIT

QTY	UNIT	REQUIREMENT	APPROVED BUDGET FOR THE CONTRACT (ABC)
169	PCS.	For Medical Kit: Digital Thermometer	: PHP 100.00 per pc. or PHP 16,900.00
169	PCS.	For Medical Kit: Automatic Arm Type Blood Pressure (BP) Monitor	: PHP 700.00 per pc. or PHP 118,300.00
TOTAL ABC			PHP 135,200.00

Please see attached Request for Quotation (RFQ) Form for more details.

Deadline of Submission of Eligibility Documents and Financial Bid	:	09 December 2020, 12:00NN
Opening of Bids	:	10 December 2020, 2:00PM

Conduct of *Opening of Bids* shall be held virtually thru Microsoft Teams or Zoom and shall be open to all prospective bidders. The BAC Secretariat may be reached through email at citembac@citem.com.ph for request of these links.

The *Notice of Award* shall only be issued to the lowest calculated bidder who has complied with the following documentary requirements below, submitted in an enclosed, sealed and properly labeled envelope or compressed folder:

Eligibility Documents (1st Envelope / Compressed Folder

1. Mayor's Permit for the current year

Expired Mayor's Permit with Official Receipt of renewal application shall be accepted as alternate documentary document during community quarantine or similar restrictions declared, in accordance with GPPB Resolution 09-2020. However, a valid Business or Mayor's Permit must be submitted after award of contract but before payment.

2. Valid PhilGEPS Registration Number (evidenced by a certificate or screen shot)

PhilGEPS Certificate of Platinum Membership may be submitted in lieu of Mayor's Permit and PhilGEPS Registration Number.

Financial Bid (2nd Envelope / Compressed Folder)

- **Quotation using the attached Request for Quotation (RFQ) Form duly signed by the authorized representative.**

Bidders shall submit these documents, on the above stated date and time, either on the following:

- a. Physical Submission at the CITEM Office, Golden Shell Pavilion, Roxas Blvd. cor. Gil Puyat Ave., Pasay City, or
- b. As highly encouraged, submission to the BAC Secretariat through online at citembac@citem.com.ph. A password protection maybe inflicted in the compressed folders to ensure security of the documents. The password for the must be disclosed an hour before the date and time of the Opening of Bids indicated above.

CITEM-BAC reserves the right to reject any or all bids disadvantageous to, waive any formality or accept such bids as may be considered advantageous to the government. Further, CITEM-BAC assumes no obligation whatsoever to compensate or indemnify the bidders for expenses or losses that may be incurred in participating in this bidding.

For inquiries, please contact the CITEM Bids and Awards Committee Secretariat, at telephone no. (02) 8-831-2201 local 309/294 or e-mail at citembac@citem.com.ph.


ATTY. ANNA GRACE I. MARPURI
Chairman, Bids and Awards Committee



CENTER FOR INTERNATIONAL TRADE EXPOSITIONS AND MISSIONS
Golden Shell Pavilion, Roxas Blvd. Cor. Sen. Gil Puyat Avenue, Pasay City
Tel.: (632) 8-831-2201 local 309/294 E-mail: citembac@citem.com.ph

REQUEST FOR QUOTATION

- Shopping with ABC of Php 50,001 and above Small Value Procurement with ABC of Php 50,001 and above
 Lease of Real Property and Venue Others: _____

Date: 04 December 2020

Company Name: _____

RFQ No.: 2020-0177

Address: _____

Contact No.: _____

Gentlemen:

Please quote hereunder your lowest possible price(s) for the following article(s)/work(s) which are urgently needed by this office. It is requested that the quotation be sealed, signed, and stamped in an envelope and submitted to CITEM BAC.

Pre-bid Conference: _____ <u>n/a</u>	Time: _____ <u>n/a</u>	Venue: _____ <u>n/a</u>
Schedule of Opening of Bids: <u>10 December 2020</u>	Time: <u>2:00PM</u>	Venue: <u>ZOOM</u>

QTY	UNIT	ARTICLE / WORK / DESCRIPTION / SPECIFICATION	UNIT PRICE	AMOUNT
		MEDICAL KIT		
		I. MEDICAL KIT CONTENT		
169	pcs.	1.) DIGITAL THERMOMETER		
		PHP 100.00 per pc. or PHP 16,900.00		
		- easy to read digital display		
		- with beeper		
		- replaceable battery; automatic shut-off		
		- can be used oral and under armpit		
169	pcs.	2.) AUTOMATIC ARM TYPE BLOOD PRESSURE (BP) MONITOR		
		PHP 700.00 per pc. or PHP 118,300.00		
		- LCD digital display		
		- With pouch for easy storage		
		- Automatic power off		
		- can be connected to power bank, USB charger etc.		
		<ul style="list-style-type: none"> • The medical kit/new normal kit must be packaged in an eco-bag. • Delivery Date: December 16, 2020 		
		TOTAL APPROVED BUDGET FOR THE CONTRACT: <u>PHP 135,200.00</u> DEADLINE OF SUBMISSION OF ELIGIBILITY DOCUMENTS AND FINANCIAL BID: <u>09 December 2020, 12:00NN</u>		

Terms and Conditions:

- 1) Delivery period: _____ working days upon acceptance of Purchase/Job Order.
- 2) Bid price must be **Inclusive of Value Added Tax**.
- 3) Payment will be processed after receipt of invoice. Other terms of payment will be based on the Contract agreed by the Purchaser and Supplier.
- 4) Any alterations, erasures or overwriting shall be valid only if they are signed or initialed by the bidder or his/her authorized representative.
- 5) Required documents, if any, must be submitted within 3 Days after receipt of notice.

The CITEM-BAC reserves the right to reject any or all bids offer and waive any defects therein and accept bid/s it may consider advantageous to the government.

ATTY. ANNA GRACE I. MARPURI
BAC Chairman

TO: CITEM Bids and Awards Committee:

Per your request, I/we have indicated the prices of the above-mentioned article(s)/work(s) on the unit price/amount column above. I/We also certify that we have read, understood, and shall conform with the terms and conditions of this requirement.

Date Submitted

Signature over printed name of the Authorized Company Representative

Designation: _____

Telephone No(s): _____

Email: _____