



Republic of the Philippines
SOUTHERN LUZON STATE UNIVERSITY
Lucban, Quezon



REQUEST FOR QUOTATION

MEDICAL SUPPLIES FOR SLSU TAYABAS CAMPUS (UHS)

Purchase Request No. 2025-09-2398

Approved Budget for the Contract: ₱ 50,000.00

The Southern Luzon State University through the Bids and Awards Committee invites interested firms/supplier to submit quotation for the procurement of **Medical Supplies for SLSU Tayabas Campus (UHS)** to apply the sum of **Fifty Thousand Pesos Only (₱ 50,000.00)** inclusive of VAT, being the **Approved Budget for the Contract (ABC)**, details as follows:


Qty.	Unit	ITEM/S DESCRIPTION
15	box	Ascorbic Acid with Zinc 100s/box
15	box	Multivitamins Capsule 500mg 100s/box
3	box	Mefenamic Acid 500mg 100s/box
4	box	Citirizine 10mg 100s/box
15	pack	Sanitary Napkin
3	box	Adhesive bandage 100s/box
15	bottle	Hydrogen Peroxide 60ml
5	pcs	Methyl Salicylate + Camphor 30g
3	pcs	Mufirocin 10g
2	pcs	Bacitracin Zinc Ointment 5g
5	pack	Cotton Balls 300g
2	pcs	Pillow 18x28
1	pcs	Aluminum Alloy 3 Layer First Aid Kit
1	pcs	Infrared Thermometer
1	pcs	BP w/ stand and wheels
4	pcs	Ice bag, Big
6	pcs	Hot Water Bag, Big
4	bottle	Methyl Salicylate Eucalyptus Oil
1	pcs	Flat sheet blanket white (small)
1	pcs	Fitted sheet (bed linen) small
2	pcs	Pillow case 18x28
5	box	Face mask
5	box	Meclizine 25mg tablet 10s/box
1	pcs	Pulse oximeter
2	pcs	Micropore 1 in. x 10yd. Size

1	pcs	Towel, cotton type, white
1	set	Glucose meter complete set
4	can	Anti-inflammatory spray 200ml
3	box	Hyosine 10s/box
2	box	Amylmetracresol 24s/box
1	box	Carvedilol 625mg 100s/box
5	pack	Cotton buds
5	bottle	Hand Sanitizer
1	pcs	Antibiotic ointment 0.330z 9.35g
5	box	Pain relief patches
2	box	Tetrahydrozoline Eye Drops, 7.5ml bottle
2	box	Losartan 50mg

1. The quotation-n must be submitted (can also be send thru email at the contact details listed below) or to the Office of the Procurement Office/Bids and Awards Committee, Southern Luzon State University, 2nd Flr. Hermano Puli Building, and shall be received by the Committee.

E-mail : slsuprocurement@slsu.edu.ph

2. The SLSU reserves the right to reject any or all quotations and/or proposals and waive any formalities/ informalities therein and to accept such bids it may consider as most advantageous to the agency and to the government. Southern Luzon State University SLSU neither assumes any obligation for whatsoever losses that may be incurred in the preparation of bids, nor does it guarantee that an award will be made.


MARIDEL C. ZABELLA
 Director, Procurement Office
 Southern Luzon State University
 Lucban, Quezon
 Tel. No.: (042)540-6519



Republic of the Philippines
SOUTHERN LUZON STATE UNIVERSITY
Lucban, Quezon
REQUEST FOR QUOTATION



Office/End-User:	University Health Services	Date:	
COMPANY NAME:		PR No.:	2025-09-2398
ADDRESS :			
TEL. NO./FAX NO. :		TIN No.:	

Please quote your lowest price on the item(s) listed below, subject to the Terms & Conditions stated below and submit your quotation duly signed by your representative not later than _____ of _____ in the return envelope attached herewith to the Procurement office.

TERMS and CONDITIONS

1. All entries must be typewritten or legibility written.
2. Delivery period within _____ upon conforme of the approved Purchase Order (P.O). Administrative penalties to Sec. 69 of the Revised IRR-RA 1984 shall be imposed for non-delivery without valid reason.
3. Warranty shall be for a minimum of three (3) months for Supplies & Materials; (1) one year for Equipment from date of acceptance by the end-user.
4. Price validity shall be for a period of sixty (60) calendar days.
5. Suppliers required to submit updated documents yearly such as G-EPS Resgistration, Certificate of Tax, Mayor's Permit, DTI, Bank Name/Account and Branch for evaluation of the Procurement Office upon submission of the quotation.
6. Bidders shall submit complete specifications showing products certification, if applicable.
7. Please indicate the brand for each items being offered.
8. The Approved budget ceiling for this procurement is PHP 50,000.00.

MARIDEL C. ZABELLA
Director, Procurement Office

Item #	Qty.	Unit	ITEM/S DESCRIPTION	Unit Price	Total Cost
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	3	box	Mefenamic Acid 500mg 100s/box		
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	5	box	Pain relief patches		
	2	box	Tetrahydrozoline Eye Drops, 7.5ml bottle		
	2	box	Losartan 50mg		

Source of Fund: **PRE STF**
Delivery Period: **30 DAYS**

Warranty:
Price Validity:

After having carefully need & accepted your Genaral Conditions, We quote you on the item(s) at prices note above. If the space of providec on the Delivery Period, Warranty & Price Validity are left blank, it means that I concur w/ the Terms & Conditions specified by SLSU Procurement Office.

Printed Name/Signature/Date