



Republic of the Philippines  
 Benguet State University  
 2601 La Trinidad, Benguet  
 www.bsu.edu.ph  
 Telefax No. (074) 661-1839;



Email:procurement@bsu.edu.ph

**REQUEST FOR QUOTATION (RFQ)**  
**(ALL ENTRIES ARE MANDATORY)**

Name of Owner/ Corporation/ Cooperative/  
 Agency: \_\_\_\_\_

QUOTATION NO. 109

Name of Business : \_\_\_\_\_

DATE: FEB 17 2025

Address: \_\_\_\_\_

P.R. NO. : 2025-02-145

Email address: \_\_\_\_\_ Telephone No. \_\_\_\_\_

ABC: PHP 136,000.00

SOURCE OF FUND: GAA

*The Benguet State University through its Bids and Awards Committee will undertake NP - SMALL VALUE PROCUREMENT for the item/s listed below under the following terms and conditions:*

- All entries must be written legibly and accurately.
- Delivery period is within 15 calendar days.
- Warranty period shall be for a minimum of three months, in case of expendable supplies, and a minimum of one year in case of non- expendable supplies from date of acceptance by the University.
- Price validity shall be for a period of 90 calendar days.
- Compliance with specifications: Kindly specify in the column provided below whether the offer fully complies with the specifications or a counter offer.
- Deadline of submission of quotation is on or before 5:00 pm of Feb. 24, 2025. **Offers may be submitted in sealed or open quotation in person, or through facsimile (074-661-1839) or email (procurement@bsu.edu.ph)**
- The item/s shall be procured by:    a) line item;    b) lot;    c) sub-lot
- Business Permit Number : \_\_\_\_\_, date of issue: \_\_\_\_\_, place of issue: \_\_\_\_\_  
 (If renewal of Business Permit is still on process, please indicate OR No: \_\_\_\_\_, date of OR : \_\_\_\_\_ for the payment of renewal).
- \* PhilGEPS Registration Number: \_\_\_\_\_

**Samuel S. Pojiden**  
 Chairperson, BAC (Goods & Services)

**College/Dept./O:UHS-Dental Clinic**

Item No.	Qty	Unit	Item	Technical Specifications (Brand and Model)		ABC	Unit Cost
				COMPLY	COUNTER		
1	5	box	LOCAL ANESTHETIC - ARTICAIN HCL + EPINEPHRINE, 50 cartridges of 1.8 ml per box, expiry - two years or more			13,000.00	
2	4	box	LOCAL ANESTHETIC - LIDOCAINE HCL + EPINEPHRINE, 50 cartridges of 1.8 ml per box, expiry - two years or more			6,000.00	
3	1	box	LOCAL ANESTHETIC - MEPIVACAINE (w/o Epinephrine), 50 cartridges of 1.8 ml per box, expiry - two years or more			3,500.00	
4	25	box	AMOXICILLIN TRIHYDRATE, hard gelatin capsule with dark brown opaque cap and light orange opaque body, 500 mg cap x 100's/box, expiry of two years or more			65,000.00	
5	10	box	IBUPROBEN, red, transparent, oblong-shaped softgel capsule containing a clear, red solution, 400 mg x 100's / box, expiry of two years or more			18,000.00	
6	4	box	Mefenamic acid, cap, 500 mg x 100's / box			14,000.00	
7	3	box	TRANEXAMIC ACID, size #0 hard gelatin capsule with bright orange opaque cap and buff opaque body, 500 mg x 100's/ box, expiry of two years or more			16,500.00	
<b>XXXXXXXXXX</b>							
<b>TOTAL</b>						<b>136,000.00</b>	

Counter offers:

Delivery Period: \_\_\_\_\_  
 Warranty: \_\_\_\_\_  
 Price Validity: \_\_\_\_\_

We hereby submit our quotations, accept the general conditions for the above items and be bound by our offer.

\_\_\_\_\_  
 Signature over Printed Name

\_\_\_\_\_  
 Date and Time