



Republic of the Philippines  
**SUGAR REGULATORY ADMINISTRATION**  
 Araneta St., Singcang, Bacolod City 6100 Philippines

March 15, 2024

Date

**REQUEST FOR QUOTATION**

Please quote your **LOWEST NET PRICE** to the Government on the items listed below, giving full and detailed description of your offers, stating the shortest time of delivery and submit your quotation in a sealed envelope, addressed to the Sugar Regulatory Administration.

Deadline of Submission: **Not later than** APR 19 2024

Note: Return this form duly accomplished in a sealed envelope.  
 For canvassing only.

Very truly yours,

*Evelyn D. Portallo*  
**EVELYN D. PORTALLO**

RBAC Secretariat Head- Alternate

JR No. 2024-03-0290	DESCRIPTION	Offer
For: <u>LUCILLE MAE M. SY</u> End-user To supply Services for the Annual Physical Exam of SRA Visayas permanent and Contract of Service personnel for July 2024  1.            1 LOT  <b>ABC: Php            800,000.00</b> Performance Period: Payment Term: Charge to: <b>24-06561-05</b>	<b>Annual Physical Exam for SRA Visayas Personnel</b> <b>Permanent:</b> Chest PA, ECG, Uric Acid, Sodium, SGPT/SGOT Routine Urinalysis, Potassium, pap smear (women), Lipid Profile FBS, Drug Test, Creatinine, CBC, Blood Urea Nitrogen (BUN) Whole Abdomen, Physical Exam with Visual Acuity <b>Contract of Service:</b> Chest PA, Routine Urinalysis, Drug Test CBC, Physical Exam with Visual Acuity	

Please indicate:

In case of purchase of goods: TIN \_\_\_\_\_ Place of Delivery \_\_\_\_\_ Date of Delivery \_\_\_\_\_

Delivery Term \_\_\_\_\_ Payment Term \_\_\_\_\_

In case of Labor: TIN \_\_\_\_\_ Completion Period \_\_\_\_\_ Warranty Period \_\_\_\_\_

**SUGAR REGULATORY ADMINISTRATION**

This is to certify that the price/s quoted above is the lowest we can offer, taxes included and that no monetary consideration, gift or in hand whatever is involved in case part or whole items quoted will be awarded to us. The prices quoted is good until \_\_\_\_\_ and can be delivered within \_\_\_\_\_ working calendar days from receipt of the Purchase Order.

Canvassed by: \_\_\_\_\_ Date \_\_\_\_\_ (Owner/Authorized Rep.) \_\_\_\_\_ Telephone No. \_\_\_\_\_ Date \_\_\_\_\_  
 Series: \_\_\_\_\_