Republic of the Philippines
MUNICIPALITY OF PASUQUIN
Ilocos Norte

REQUEST FOR QUOTATION

Date: 10.14.2026
Qoutation NO. 2026.147
PR No: 2026.10.337

Please qoute your lowest price on the item/s listed beow, subject to the General Conditions on the last page, stating the shortest time of delivery and submit your qoutation duly signed by your representative not later than October 20, 2026 @ 8:30AM in the return envelope attached herewith.

PATRICK JOHN T. RATUITA, MAPA
BAC Chairman

NOTE:
1. **All entries must be type written**
2. **Delivery period within thirty (30) calendar days**
3. **Warranty shall be for a period of six(6) months for supplies & materials, one(1) year for equipment, from date of acceptance by the procuring entity**
4. **Price validity shall be for a period of one (1) month upon submission of the quotation**
5. **The following documents shall be attached upon submission of the quotation:**
   a. **Mayor's / Business Permit**
   b. **Certificate of Registration**
   c. **PhilGEPS registration certificate/number**
6. **Approved Budget of the Contract P 42,000.00**

ITEM NO.	ITEM & DESCRIPTION	Brand/Model	QTY.	UNIT	UNIT PRICE	TOTAL COST
1	Glucometer		5	piece		
2	Glucometer strips (25pcs/canister)		18	canister		

Brand and Model :
Delivery Period :
Warranty :
Price Validity :

After having carefully read and accepted your General Conditions, I/We qoute you on the item at prices noted above.

Printed Name/Signature

Tel. No./Cellphone No./Email Add.

supply & delievry of glucometer for purok kalusugan DM screening program
2026.10.265