



Republic of the Philippines

PHILIPPINE HEALTH INSURANCE CORPORATION

Citystate Centre, 709 Shaw Boulevard, Pasig City

€ (02) 8662-2588 ⊕ www.philhealth.gov.ph

PhilHealthOfficial
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REQUEST FOR QUOTATION

Date:

May 23, 2025

RFQ No.

2025-111

The Philippine Health Insurance Corporation (PhilHealth) through its Secretariat for the Bids and Awards Committees (SBAC), intends to procure the following through Section 34 Small Value Procurement of the Implementing Rules and Regulations of Republic Act 12009:

WOMEN'S MONTH SHIRT

Approved Budget

:P226,250.00

Purchase Request Nos.

: 25-0238-SVP, GAD

Delivery Period

: Twenty (20) calendar days upon approval of sample by the end-user

Interested suppliers of known qualifications are hereby invited to submit a price quotation/proposal duly signed by its authorized representative on or before 5:00 p.m. of May 30, 2025 through electronic email or physically at the address below:

SECRETARIAT SERVICES TEAM

Secretariat for the Bids and Awards Committees (SBAC) Philippine Health Insurance Corporation (PhilHealth) Rm. 408, 4th Floor, SBAC Office

709 Citystate Centre, Shaw Blvd., Pasig City

Telephone Nos.: (02) 8441-7444 local 7675

MS. CHARISS GAIL H. DALIDA

BAC Secretariat/Canvasser dalidac@philhealth.gov.ph

MR. JOSEPH O. VERGARA
Head, Secretariat for the Bids and Awards Committees

The Supplier shall also submit a copy of the following documentary requirements along with the duly signed quotation on or before the deadline of submission of quotation:

- Mayor's /Business Permit for CY2025;
- 2. PhilGEPS Registration Number or Certificate of PhiGEPS Registration (Platinum Membership);
- 3. Proof of payment for the PhilHealth Contribution (1st Quarter of 2025);
- 4. Notarized Omnibus Sworn Statement; and
- 5. Valid Tax Clearance.

INSTRUCTION TO SUPPLIERS

- Submit your duly signed quotation using the prescribed Quotation Form together with the compliance with the Terms and Conditions and Technical Specifications (Annexes A, B and C of the RFQ);
- Provide all the required information of the provider/supplier in the **Quotation Form** and do not alter the contents of the form in any way.
- Non-compliance with the submission of the Quotation Form and Documentary Requirements as stated above within the given deadline shall be automatically DISQUALIFIED.
- Sample will be required whenever necessary.



"ANNEX A"

QUOTATION FORM

A A	Address Contact Contact Email A	Person: Number: ddress: ing carefully	read and acce	epted the Terms and Cor /s for the item/service as		RFQ specifi	ied in
Item No.	QTY/ Unit	Unit Price	Total Price	ITEM Description and Technical Specifications	STATEMENT OF COMPLIANCE ("Comply" or "Not Comply")	Supplier's Offer Do not fill this out if you did not comply with the Tech Specs.	
						Unit Price	Total Price
1	905 pcs	250.00	226,250.00	WOMEN'S MONTH SHIRT See attached "ANNEX C" for Technical Specifications			
			P226,250.00			TOTAL:	
P.O. /	J.O.		PELIVERY PER	OD UPON RECEIPT OF by the end-user.		ent of Comp y" or "Not Co	
Ιl	nereby c	ertify to con	nply and delive	r all the above requireme	ent		
				Signature over	r Printed Name	_	
Position / Designation							
				D	ate		

"ANNEX B"

TERMS AND CONDITIONS:

- 1. Suppliers/Providers shall provide correct and accurate information required in this form.
- 2. Suppliers/Providers shall quote on the project.
- 3. Price quotation/s must be valid for **thirty (30) calendar days** from the date of submission.
- 4. Price quotation/s, to be denominated in Philippine Peso shall include all taxes, duties and/or levies payable.
- 5. Quotation exceeding the Approved Budget for the Contract of the item shall be rejected.
- 6. Award of contract shall be made to the lowest quotation (for goods and infrastructure), passed the technical evaluation or, the highest rated offer (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
- 7. Any interlineations, erasures or overwriting shall be valid only if they are signed or initialed by you or any of your duly authorized representative/s.
- 8. The item/s shall be delivered according to the requirements specified in the Technical Specifications and the official address of the corporation.
- 9. PhilHealth shall have the right to inspect and/or to test the goods to confirm their conformity to the technical specifications.
- 10. In case two (2) or more suppliers are determined to have submitted the Lowest Calculated Quotation/Lowest Calculated and Responsive Quotation, PhilHealth shall adopt and employ "draw lots" as the tie-breaking method to finally determine the single winning provider in accordance with the GPPB Circular 06-2005.
- 11. Payment shall be made via check (Land Bank) after delivery and upon the submission of the required supporting documents, inspection and acceptance.
- 12. Liquidated damages equivalent to one-tenth of one percent (0.1%) of the value of the goods not delivered within the prescribed delivery period shall be imposed per day of delay. PhilHealth shall rescind the contract once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount, without prejudice to the other courses of action and remedies open to it.
- 13. Warranty Security of one percent (1%) of the gross amount (for items with warranty) shall be automatically deducted from the contract for a minimum warranty period of three (3) months for expendable goods or one (1) year warranty for non-expendable goods and shall be returned after the lapse of the warranty period provided however that the goods delivered are free from defects and all the conditions imposed under the contract have been fully met.
- 14. The contracting parties shall comply with Office Order No. 0018-2015 "Reiteration of PhilHealth No Gift Policy (Revision 1).
- 15. Each of the documents submitted in satisfaction of the requirements is an authentic copy of the original, complete, and all statements and information provided therein are true and correct.

I hereby declare that I understand and acconditions listed herein.	eknowledge the instructions and terms and	
	Signature over Printed Name	
	Position / Designation	
	Date	





Republic of the Philippines

PHILIPPINE HEALTH INSURANCE CORPORATION

ANNEX C

TECHNICAL SPECIFICATIONS

Procurement of Women's Month Shirt

As part of PhilHealth's effort in mainstreaming Gender and Development in the Corporation. The GADFPS shall procure a Shirt for all Head Office employees (Permanent and Casuals)								
which shall be worn during GAD activities.								
Type Found-Neck Shirt – 905 pieces								
Round-Neck Shirt – 905 pieces								
905 pieces of Shirt								
Shirts -Assorted Sizes from Extra Small to Four-XL (Unisex)								
Shirts : 100% Pure Cotton Fabric								
Color: Purple Texture Type: Cotton Printing Method: Heat Transfer/ DTG/ DTF Print Design: Print must be visually clear and readable								
Individual Polybag								
Fifteen (15) calendar days upon complete delivery								
The Supplier must comply with all requirement that will be needed by the Secretariat for the Bids and Awards Committee (SBAC) of PhilHealth and PhilHealth Comptrollership Department during the processing of the payee's voucher, such as, but not limited to the following, if applicable: a. BIR Annual Tax Return b. Latest Proof of PhilHealth Contribution c. PhilGeps Registration d. Sample of Official Receipt e. SEC Certificate of Registration, Updated Mayor's/business Permit f. Statement of Account/Billing Statement/Sales Invoice								





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I hereby certify to co	mply and deliver all the	e above requirements.		3
,				
		Signature over Printed	Name	
		Position / Designati	on	

Date

WOMEN'S MONTH SHIRT DESIGN



(front)



GAD shirt studies