



PHILIPPINE HEALTH INSURANCE CORPORATION PhilHealth Regional Office III

# REQUEST FOR QUOTATION SHOPPING RFQ NO. 2025-006

PhilHealth Region III, through its Bids and Awards Committee intends to procure the following:

Project Title	PROCUREMENT OF BILL COUNTER /BANK NOTE FOR LHIO ANGELES		
Approved Budget for the Contract	Php37,500.00		
Mode of Procurement	SHOPPING		
Deadline of Submission	MARCH 27, 2025		

### GENERAL CONDITIONS:

- 1. All entries must be typewritten or written legibly in print.
- 2. Price validity shall be for a period of 90 calendar days
- 3. Requirements to be submitted by the lowest calculated bidder:
  - a. 2024 Mayor's Permit or Business Permit
  - b. PhilGEPS' Proof of Registration or PhilGEPS Certificate
  - c. PhilHealth Certificate of Updated Contribution
  - d. DTI or SEC Registration Certificates (whichever is applicable)

  - e. BIR 2303 Registration Certificate

    f. TAX Clearance Certificate
    g. Omnibus Sworn Statement (if applicable)
    h. Annual Income / Business Tax Return (if applicable)
  - i. The completed form shall serve as your formal quotation. Please submit your proposal to PhilHealth Region 3, City of San Fernando(P) or through electronic mail at macalinoa@philhealth.gov.ph

ARNAIZ M. MACALINO Official Canvasser

After	having	carefully	read and	accepted	the	general	conditions	in	your	Request	for
		ereunder is							<u> </u>	īk	

Qty.	Unit	Item Description / Specification	Approved Budget for the Contract	Total Cost
3	units	BANK NOTE/BILL COUNTER – Automatic UV (Ultra Violet) Counterfeit Detection Automatic MG (Magnetic) Counterfeit Detection for other Currencies Half-note and Double-note Detection comes with free external LED Display Automatic Counting with	Total Cost: #37,500.00	



Date:

	Batching mode –Compact and Stylish money counter device with an external LCD display. Save time and climinate manual bill computing through its micro-computerized mechanism that provides accurate and high-speed money counting process of up 1,000 bills per minute	
Company N	ame:	
Business Ad		
Name and S	ignature of Authorized Representative:	
Contact Nur	nber of Authorized Representative:	
Email Addre	ess:	





Republic of the Philippines

# PHILIPPINE HEALTH INSURANCE CORPORATION Philhealth Regional Office III

- Philhealth Bldg., Lazatin Blvd., San Agustin, City of San Fernando, Pampanga
- **L** (045) 963-0299 ⊕www.philhealth.gov.ph
- PhilHealthRegionIII X teamphilhealth

# TECHNICAL SPECIFICATIONS SEMI EXPENDABLE OFFICE EQUIPMENT FOR CY 2025

## OBJECTIVE

To be able to find a supplier that will meet and provide the requirements needed by PhilHealth Regional Office III for the procurement of **Semi Expendable Office Equipment** for CY 2025.

# SPECIFICATIONS:

Qty.	Unit	Item Description
3	units	Automatic UV (Ultraviolet) Counterfeit Detection Automatic MG (Magnetic) Counterfeit Detection for other Currencies Half-note and Double-note Detection Comes with free external LED Display Automatic Counting with Batching mode     Compact and stylish money counter device with an external LCD display Save time and eliminate manual bill computing through its microcomputerized mechanism that provides accurate and high-speed money counting process of up to 1,000 bills per minute.

#### WARRANTY:

 The item is free from defects in workmanship and materials for six (6) months from the date of purchase.

## OTHER TERMS AND CONDITION:

- Fees and charges payable shall be paid within (15) calendar days from the date
  of Invoice or Statement of Account and completion of documentary
  requirements for the processing of payment.
- Cost shall be inclusive of VAT and other tax exemptions.
- Please provide copy of brochure of product to be offered with details of the specifications of the unit.
- Acceptance of the bid offer will be based on the compliance to the item requirements.

# LIQUIDATED DAMAGES:

If the Service Provider fails to deliver any or all of the goods and/or to performance the services within the period specified in the contract, the Procuring Entity shall, without prejudice to its order remedies under the contract and under the applicable law, deduct from the contract price as liquidated damages, the applicable rate of one-tenth (1/10) of one percent (1%) of the cost of the unperformed portion for every day of delay, provided that the maximum deduction shall be ten percent (10%) of the total amount of the contract price, the Procuring Entity reserves the right to rescind the contract, without prejudice to other courses of action and remedies available to it.







# DELIVERY DATE:

· Within 30 Working Days upon Conforme on Purchase Order

# MODE OF PROCUREMENT:

Local Shopping

# DISTRIBUTION LIST:

- ANGELES
- CABANATUAN
- SAN FERNANDO

Prepared by:

Social Insurance Assistant I, GSU

Reviewed by:

AMA. ADELINDA M. MORALES

Acting Head of GSU

Verified by:

FERDINAND M. GUINTO

Acting ASS Head/ Concurrent HRU Head Recommending Approval:

RUBY M. VITUG

Division Chief IV, MSD

Approved by:

HENRY V. ALMANON Acting Vice President, PRO III