



Republic of the Philippines
OFFICE OF THE OMBUDSMAN
Area Office for Mindanao
Earth corner Libra Street, GSIS Heights,
Matina, Davao City

REQUEST FOR QUOTATION

Quotation Number : **RFQ No. 26-BAC2-002 January 2026**
Date : 7 January 2026

The Office of the Ombudsman, Area Office for Mindanao, through its Bids and Awards Committee 2 (BAC 2), as duly authorized to conduct Small Value Procurement for **“Procurement of Automatic Blood Pressure Monitor Upper Arm Sphygmomanometer Digital Display”** in accordance with Section 34.1 of the Implementing Rules and Regulations of Republic Act No. 12009, hereby invites all interested suppliers/bidders to offer their lowest government price.

Name of Project : “Procurement of Automatic Blood Pressure Monitor Upper Arm Sphygmomanometer Digital Display”
Total Approved Budget for the Contract (ABC) : ₱ 15,000.00
Location : Office of the Ombudsman, Area Office for Mindanao
Earth corner Libra Street, GSIS Heights, Matina, Davao City
Specifications : See Attached Annex “A”
Deadline of submission : **13 January 2026, 5:00 P.M.**
Delivery period : Within thirty (30) calendar days
from receipt of the Purchase Order (PO)

Interested bidders/suppliers are required to submit their **duly accomplished Price Quotation Form (PQF) (Annex A) and documentary requirements (enumerated below)** on or before the deadline of submission at the Office of the Ombudsman, Area Office for Mindanao, Earth corner Libra Street, GSIS Heights, Matina, Davao City. Bidders/suppliers have the option to submit open or sealed quotations in the address given above. Open quotations may be submitted thru email at minbac2@ombudsman.gov.ph


Bidders/suppliers shall submit the following documentary requirements together with their PQF:

**For ABCs ₱50,000.00
and Below**

- 1) Valid and Current Mayor’s / Business Permit 2025
- 2) PhilGEPS Registration
- 3) Notarized Authorization / SPA if the PQF is signed by the representative of the Sole Proprietor (Annex C) *or* Notarized Secretary’s Certificate if the PQF is signed by the Corporation/Partnership/Joint Venture/Cooperative’s representative (Annex D)

Award of contract shall be made to the lowest calculated and responsive bidder/supplier which complies with the minimum technical specifications (Annex A) and General Terms and Conditions (Annex B).

For further inquiries you may email us at minbac2@ombudsman.gov.ph or you may call through landline numbers (082) 221 3431 or (082) 333 2239.


MARIE JOSEPHINE B. DE VERA
GIPO IV, PIAAPB-D
Chairperson, BAC 2

**ANNEX A
PRICE QUOTATION FORM**

Quotation No.	RFQ No. 26-BAC2-002 January 2026
PR No.	2025-12-177 dated 15 December 2025
APP/SPPMP Code	2025-MDE-0003
Canvass No.	1 st Canvass
Date:	7 January 2026
Mode of Procurement:	Sec. 34.1 (SVP)
Authority/Reso. No.:	151, s. 2025
Authority/Reso. Date:	16 December 2025

MARIE JOSEPHINE B. DE VERA

Chairperson

Bids and Awards Committee 2

Office of the Ombudsman, Area Office for Mindanao

Matina, Davao City

Thru: BAC 2 Secretariat

Dear **Ma'am**:

After having carefully read and accepted the Terms and Conditions of this PQF and followed the Instructions to Bidders/Suppliers specified in Annex B, hereunder is our quotation/s for the item/s as follows:

Item No.	Total ABC (PhP)	Qty.	Unit	OMBUDSMAN SPECIFICATIONS	Bidder's offer (Tech. spec. if applicable)	Unit Price (inclusive of taxes)	Total Price
	15,000.00	2	units	AUTOMATIC BLOOD PRESSURE MONITOR UPPER ARM SPHYGMOMANOMETER DIGITAL DISPLAY <input type="checkbox"/> COMPLY <i>Minimum Specifications</i> <i>Various Detection Features:</i> - Body Movement Detection <input type="checkbox"/> COMPLY - Arrythmia Detection <input type="checkbox"/> COMPLY - Hypertension (High Blood Pressure Indicator) <input type="checkbox"/> COMPLY <i>Additional Features:</i> - Smart Device Application Supported (For Blood Pressure Health Monitoring and Management) <input type="checkbox"/> COMPLY <p style="text-align: center;">--NF--</p> <i>Purpose: For the health monitoring of personnel of the Office of the Ombudsman - Area Office for Mindanao.</i>			
GRAND TOTAL							

Name of Authorized Representative

Signature

Date

Bidder/Supplier's Information

Bidder/Supplier's Name	:	
Address	:	
Tel./Cellphone No.	:	
Email Address	:	
PhilGEPS Reg'n Cert. No.	:	
PhilGEPS Reg'n valid until	:	

ANNEX B

INSTRUCTIONS TO BIDDERS/SUPPLIERS

1. Completely fill out the Price Quotation Form (Annex A), technical specification (if applicable), unit / total price, and Supplier/Bidder's information. Do not forget to sign the Price Quotation Form.

GENERAL TERMS AND CONDITIONS

1. **BID/PRICE QUOTATION VALIDITY.** Bids/Price Quotations should be valid for **sixty (60)** calendar days counted from the deadline of submission of bids/price quotations;
2. **SAME PRICE QUOTATION:** If two (2) or more suppliers submit the same price quotation and have been post-qualified as the suppliers with the Lowest Calculated Responsive Quotations, the Office of the Ombudsman shall adopt and employ "draw lots/toss coin" as the tie breaking method to finally determine the single winning bidder. (GPPB Circular No. 06-2005)
3. **PRICE ESCALATION.** All bid prices/price quotations for the goods or services in the contract as awarded shall be considered as fixed prices, and therefore not subject to price escalation during contract implementation.
4. **ALTERNATIVE BIDS.** Alternative Bids/Price Quotations shall be rejected. For this purpose, alternative bid/price quotation is an offer made by a Bidder/Supplier in addition or as a substitute to its original bid/price quotation which may be included as part of its original bid/price quotations or submitted separately therewith for purposes of bidding.
5. **TAXES.** The total price quoted is subject to withholding tax and payable by check.
6. **DELIVERY PERIOD.** Within **thirty (30) calendar** days from receipt of the Purchase Order (PO).
7. **INCIDENTAL CHARGES AND SERVICES.** The cost of transportation, insurance, and other costs incidental to delivery of the Goods shall be included in the price quoted per item by the Bidder/Supplier. An additional or separate delivery charge in the bid/price quotation shall be treated as non-responsive and shall be rejected.
8. **TERM OF PAYMENT.** Payment shall be CHARGED ACCOUNT, unless specified. Cash on Delivery (COD) shall not be allowed, unless accepted during bid/price quotation evaluation.
9. **RETENTION MONEY.** The obligation for the warranty shall be covered by either retention money in an amount equivalent to at least one percent (1%) of every progress payment, or a special bank guarantee equivalent to at least one percent (1%) but not to exceed five (5%) of the total contract price. The said amounts shall only be released after the lapse of the warranty period or, in the case of Expendable Supplies, after consumption thereof; Provided, however, That the supplies delivered are free from patent and latent defects and all the conditions imposed under the contract have been fully met;(GPPB Resolution No. 30-2017 dated 30 May 2017)
10. **LIQUIDATED DAMAGES.** No payment shall be made until full delivery of item/s is/are completed. Delay in the delivery shall be subject to liquidated damages by way of penalty at 1/10 of 1% of each day of delay.
11. **ALTERATION OF TECHNICAL SPECIFICATIONS AND TERMS AND CONDITIONS.** Altering and/or amending the technical specifications and Terms and Condition(s) may be considered non-responsive / non-compliant.

ANNEX C

Office of the Ombudsman
(For Single Proprietorship only)
Authority of Signatory

AUTHORIZATION LETTER

I, _____, Owner/Proprietor of _____ *[company name]*, a single proprietorship registered under the laws of _____, with its registered office at _____ *[address of bidder]*, has made, constituted and appointed _____ *[authorized representative]* as true and lawful attorney, for it and its name, place and stead, to do, execute and perform any and all acts necessary, participate and/or represent _____ *[company name]* in the bidding (under alternative mode of procurement) at the **OFFICE OF THE OMBUDSMAN, AREA OFFICE FOR MINDANAO** as fully and effectively as owner/proprietor might do if personally present with full power of substitution and revocation and hereby confirming all that said representative shall lawfully do or cause to be done by virtue hereof.

IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of _____, 202__, at _____
_____.

Affiant

ANNEX D

Office of the Ombudsman
(For Corporation/Partnership/Joint Venture)
Authority of Signatory

SECRETARY'S CERTIFICATE

I, _____, a duly elected and qualified Corporate Secretary of _____
_____ [company name], a corporation duly organized and existing under and by virtue of the
law of the _____ DO HEREBY CERTIFY, that:

I am familiar with the facts herein certified and duly authorized to certify the same;

At the regular meeting of the Board of Directors of the said Corporation duly convened and held on _____
_____ at which meeting a quorum was present and acting throughout, the following resolutions were
approved, and the same have not been annulled, revoked and amended in any way whatever and are in full force and effect
on the date hereof:

RESOLVED, that _____ [authorized representative] be, as it hereby is, authorized to
participate in the bidding (under alternative mode of procurement) at the **OFFICE OF THE OMBUDSMAN, AREA
OFFICE FOR MINDANAO**; that if awarded the project shall enter into contract with the **OFFICE OF THE
OMBUDSMAN, AREA OFFICE FOR MINDANAO**; and is granted full power and authority to do, execute and perform
any and all acts necessary and/or to represent _____ [company name] in the bidding.

WITNESS the signature of the undersigned as such officer of the said
_____ this _____.

(Corporate Secretary)

REPUBLIC OF THE PHILIPPINES)
CITY/MUNICIPALITY OF _____) SS.

ACKNOWLEDGMENT

BEFORE ME, a Notary Public for and in the (Province/City/Municipality) of _____, personally appeared
_____ with _____ No. _____ issued on _____, known to me and to me known to be
the same persons who executed the foregoing instrument which he/she acknowledged to me to be his/her free and voluntary
act and deed, consisting of only _____ () page/s, including this page in which this Acknowledgement is written, duly signed
by him/her and his/her instrumental witnesses on each and every page hereof.

WITNESS MY HAND AND SEAL this _____ at _____, Philippines.

Doc. No. _____
Page No. _____
Book No. _____
Series of _____.