



Date : / /	التاريخ : / /
purchase Request ID :	رقم طلب إذن الشراء :
For The Supply Of <input type="checkbox"/> Goods <input type="checkbox"/> Services	لشراء <input type="checkbox"/> بضاعة <input type="checkbox"/> خدمات
Quotation To Be Received By : / /	تتوقع تسليم الطلب : / /
This Offer Valid To : / /	هذا العرض صالح لغاية : / /
Fund Project Code: Project Code: CBPF-LEB-24-S-NGO-27912	رمز مشروع التمويل:
Budget Line Code : B.1 Quality Assistive devices and home- care supplies	رمز خط الميزانية:
This Offer Provide By :	هذا العرض مقدم من:

ADJI Requests your Price Quotation For The Following (GOODS AND/OR SERVICES REQUIRED) specified in this request for quotation (RFQ)

#	ITEM	Description	Quantity	For Suppliers Only		
				Unit Price	VAT	Net Price
1	Pedalo		1		\$0.00	\$0.00
2	WheelChair Adult		1		\$0.00	\$0.00
3	Pediatric WheelChair		1		\$0.00	\$0.00
4	Commond Chair		1		\$0.00	\$0.00
5	Walker Foldable		1		\$0.00	\$0.00
6	Walker Foldable + 2 wheels		1		\$0.00	\$0.00
7	Child Rollator		1		\$0.00	\$0.00
8	Adult Rollator		1		\$0.00	\$0.00
9	Quadripod Crutch		1		\$0.00	\$0.00
10	Crutch elbow x2		1		\$0.00	\$0.00
11	underarm x2		1		\$0.00	\$0.00
12	Raising toilet Seat		1		\$0.00	\$0.00
13	Air Mattress		1		\$0.00	\$0.00
14	Kaye Walker		1		\$0.00	\$0.00
15	Child Walker Foldable		1		\$0.00	\$0.00
16	Child Walker Foldable + 2 wheels		1		\$0.00	\$0.00
17	Water Mattress		1		\$0.00	\$0.00
18	Cervical Rigide Collar		1		\$0.00	\$0.00
19	Sponge Cervicale Orthosis		1		\$0.00	\$0.00
20	Cervical Rigide Collar + Thracheo		1		\$0.00	\$0.00
21	Shoulder Fixation Bandge		1		\$0.00	\$0.00
22	Abdominal Corset		1		\$0.00	\$0.00
23	Jewet HyperExtension Corset		1		\$0.00	\$0.00
24	Thumb Support Hand-wrist Splint		1		\$0.00	\$0.00
25	Thumb Support soft		1		\$0.00	\$0.00

26	Knee Support Soft		1		\$0.00	\$0.00
27	Knee Immobilizer		1		\$0.00	\$0.00
28	Ankle Support Soft		1		\$0.00	\$0.00
29	Ankle Support rigide		1		\$0.00	\$0.00
30	urine bag		1		\$0.00	\$0.00
31	urine catheters		1		\$0.00	\$0.00
32	urine condom		1		\$0.00	\$0.00
33	feeding tube		1		\$0.00	\$0.00
34	Adult wheelChair size 52		1		\$0.00	\$0.00
35					\$0.00	\$0.00
36					\$0.00	\$0.00
37					\$0.00	\$0.00
					Total	\$0.00
					TVA	\$0.00
					NET Total	\$0.00

This offer Submit By

Email Address

Sealed Envelope

Name : Rami Hallak	الإسم :
Address : Tripoli-Abo Samra- Sikkeh Bayda	العنوان :
Email : purchasing@rahmahospital.org	البريد الإلكتروني :
phone : 06-448324	رقم الهاتف :
Quotation Submission deadline : 30/9/2024	المهلة الأقصى لتقديم الطلب :