

PHILIPPINE CHILDREN'S MEDICAL CENTER Quezon Avenue, Quezon City Tel. No. 588-9900 local 224/226

REQUEST FOR QUOTATION No. RFQ-2021-374

Date:			NO. KI	-Q-2021-374				
	of Supp	lier.						
Address:								
	hone No).						
Pleas	e quote	your	lowest price as per specifications per ite	em listed belo	w thru Alteri	native Mode	of Procurem	ent -
			1.b) on or before <u>September 15, 2021</u>					
			uotation at 588-9997 or email at pcmcp	The state of the s	om c/o MS. I	MARY ROSE	P. ESTOR	
ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	BRAND/ PACKAGING	UNIT COST	TOTAL COST
1	2,800	рс	Pandesal, 30g/pc	3.50	9,800.00			
2	742	If	Pullman, 21sl/lf	65.00	48,230.00			
-				00.00	40,230.00			
			 Freshly baked Delivery Schedule: Tuesday/Friday 5:3 Staggered delivery/payment 	O AM				
			(FOR 4th QUARTER OF CY 2021 USAGE)					
			TOTAL ABC		58,030.00			
	Supplies Staggers Docume Shoppir PhilGEP	to be ed Deli entary ng (52. S Ref#	:ness Permit	and longer ex	piry			
	ture ove of Supp		ed Name					USDD DEMC DOSA

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HSPR-PCMC-RQF3 170314 Rev 1

*For Certificate of Creditable Tax Withheld at Source (BIR Form N. 2307) and Certificate of Final Tax Withheld at Source (BIR Form No. 2306) please submit your latest/updated **BIR Certificate of Registration (BIR Form No. 2303)** together with your quote.