



PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City
Tel. No. 8588-9900 local 224/226

REQUEST FOR QUOTATION
No. RFQ-2021-376

Date:

Name of Supplier: _____

Address: _____

Telephone No. _____

Please quote your lowest price as per specifications per item listed below thru Alternative Mode of Procurement - (Shopping - Sh 52.1.b) on or before **September 15, 2021**

Please fax your quotation at **588-9997** or email at **pcmcproc@gmail.com** c/o **MS. MARY ROSE P. ESTOR**

ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	BRAND/PACKAGING	UNIT COST	TOTAL COST
1	500	pc	Biscuit assorted, 10s	6.00	3,000.00			
2	250	pc	Biscuit crackers soda salted, 10s	6.00	1,500.00			
3	192	br	Butter salted, 200g	65.00	12,480.00			
4	4	br	Butter unsalted, 225g	150.00	600.00			
5	192	br	Cheese, pasteurized processed filled 200g	60.00	11,520.00			
6	9	br	Cheese, pasteurized processed spread, quickmelt, 165g	87.00	783.00			
7	280	pc	Infant biscuit, 10s	13.00	3,640.00			
8	100	pk	Sugar washed, 1kg	53.50	5,350.00			
9	400	pk	Sugar white, 1kg	62.00	24,800.00			
			-Staggered delivery/payment per month					
TOTAL ABC					63,673.00			

Terms and Conditions:

Supplies to be delivered should have at least one (1) year and longer expiry

Documentary Requirements:

Shopping (52.1b)

PhilGEPS Ref#:

Mayor's/ Business Permit

PhilGEPS Reg. No

Signature over Printed Name

Name of Supplier _____

HSPR-PCMC-RQF3
170314 Rev 1

*For Certificate of Creditable Tax Withheld at Source (BIR Form No. 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.