

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

REQUEST FOR QUOTATION
 No. RFQ-2021-401

Date: September 17, 2021

Name of Supplier: _____

Address: _____

Telephone No. _____

Please quote your lowest price as per specifications per item listed below thru Alternative Mode of Procurement - Negotiated Procurement) **on or before: September 25, 2021**

Please fax your quotation at 8588-9997 or email at pcmcproc@gmail.com c/o Al Menor

ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	BRAND/PACKAGING	UNIT COST	TOTAL COST
			Repair of Syringe Pump with SN# 151407, 214536, 151256, 214588, 212593,					
			Scope of work					
	5	pcs	Replacement of Battery Module	9,085.58	45,427.90			
	5	pcs	LCD (Operating Unit)	19,955.17	99,775.85			
Total:					145,203.75			

Terms and Conditions:

Documentary Requirements:

Nego. Proc (53.9) - Small Value

PhilGEPS Ref#: _____

Mayor's/ Business Permit

PhilGEPS Reg. No

ITR [for ABC above 500k]

Omnibus Sworn Statement [for ABC above 50k]

 Signature over Printed Name

Name of Supplier _____

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 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 N. 2303)** together with your quote