



PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City
Tel. No. 588-9900 local 224/226

REQUEST FOR QUOTATION
No. RFQ-2021- 414

Date:

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 October 06, 2021.**

Please fax your quotation at 588-9997 or email at pcmcproc@gmail.com

ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	BRAND/ PACKAGING	UNIT COST	TOTAL COST
1	600	pc	Microtome blade	110.00	66,000.00			
2	10000	pc	Coverslip 24 x 56	1.50	15,000.00			
3	8	bt	Mounting Medium for Frozen Section	727.00	5,816.00			
4	600	pc	Filter Cards for Cytospin	31.25	18,750.00			
5	5000	pc	Frosted Glass Slide (Super Frosted)	1.00	5,000.00			

TOTAL ABC

110,566.00

Terms and Conditions:

Supplies to be delivered should have at least one (1) year and longer expiry
Staggered Delivery and Staggered Payment for CY-2021

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 _____

Handwritten signature and date: 9/29/21

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 N. 2303) together with your quote.*