



PHILIPPINE CHILDREN'S MEDICAL CENTER
Quezon Avenue, Quezon City
Tel. No. 8588-9900 local 224/226

REQUEST FOR QUOTATION
No. RFQ-2021-417

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 - Small Value) on or before **October 7, 2021**

Please fax your quotation at 8588-9997 or email at pcmproc@gmail.com c/o MS. LOVELY M. ALGODON

ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	BRAND/PACKAGING	UNIT COST	TOTAL COST
1	200	pc	PCMC Journal size: 8.5 x 11 no. of pages: 100 pages stock: C2S 120 color: cover (full colored) inside (one color/full colored for graphs, tables, diagram, etc.) process: offset printing binding: perfect binding others: with UV lamination, including formatting and designing	650.00	130,000.00			
TOTAL ABC					130,000.00			

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 _____

r. 10/1/21

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.