



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

REQUEST FOR QUOTATION
 No. RFQ-2022-025

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 52.1b) on or before **January 21, 2022.**

Please fax your quotation at 8-588-9997 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	150	pc	Cleaning Tablet for Combi Oven, Blue	100.00	15,000.00			
2	200	pc	Cleaning Tablet for Combi Oven, Red	110.00	22,000.00			
3	120	pc	Dish towel, microfiber, blue, 16x36"	150.00	18,000.00			
4	200	pc	Dish towel, microfiber, green, 16x36"	150.00	30,000.00			
5	120	pc	Dish towel, microfiber, red, 16x36"	150.00	18,000.00			
6	120	pc	Dish towel, microfiber, yellow, 16x36"	150.00	18,000.00			
7	1,920	pc	Mouthguard, spit shield	30.00	57,600.00			
8	120	scht	Multipurpose, Cleaner/sanitizer, 30mL/scht	16.00	1,920.00			
			Delivery Terms: _____					
TOTAL ABC					180,520.00			

Documentary Requirements:

Shopping (52.1b)

PhilGEPS Ref# _____

Mayor's/ Business Permit

PhilGEPS Reg. No

 Signature over Printed Name

Name of Supplier _____

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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 N. 2303)** together with your quote.