



PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City

ALTERNATIVE MODE

REQUEST FOR QUOTATION

No. RFQ-2022-334

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 JULY 25, 2022 .

Please fax your quotation at 8588-9997 or email at pcmcproc@gmail.com / Attention: MS. LOVELY M. ALGODON

Table with 8 columns: ITEM NO., QTY, UNIT, DESCRIPTION, ABC/UNIT, TOTAL ABC, UNIT COST, TOTAL COST. Row 1: 1, 1, lot, Certification Audit - ISO Certification Body, 308,000.00, 308,000.00. Includes sub-items for Terms: Conduct of External Audit, External Audit Report, Provision of External Auditors.

Table with 2 columns. Left: PCMC Requirement: Delivery Period: Seven (7) working days upon receipt of approved Purchase Order. Right: Please indicate below your delivery terms (in number of days)

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 500k]

Handwritten signature/initials.

Signature over Printed Name
Name of Supplier

*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.