

PHILIPPINE CHILDREN'S MEDICAL CENTER Quezon Avenue, Quezon City ALTERNATIVE MODE

REQUEST FOR QUOTATION No. RFQ-2022-343

Date:							
Name o	of Supp	lier:					
Address:							
Telephone No.							
Please	quote	your lo	owest price as per specifications per item listed below thru Alternative Mode of Procurement -				
Negoti	ated P	rocure	ment - Small Value) on or before				
Please	fax yo	ur quo	tation at 8588-9997 or email at pcmcproc@gmail.co	m / Attention:	MS. LOVELY	M. ALGODON	_
ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	UNIT COST	TOTAL COST
1	23	рах	Accommodation/Meals (3 meals)	2,000.00	46,000.00		
	23	Рах	ANNUAL RETREAT FOR RESIDENTS AND FELLOWS	2,000.00	40,000.00		
			September 3-4, 2022				
2	23	рах	Additional meal (extension to lunch of Sept. 4, 2022)	260.00	5,980.00		

TOTAL ABC 51,980.00

Documentary Requirements:

Nego. Proc (53.9) - Small Value
PhilGEPS Ref #: そりしていい
Mayor's/ Business Permit
PhilGEPS Reg. No
ITR [for ABC above 500k]
Omnibus Sworn Statement [for ABC above 500k]

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 <u>BIR Certificate of Registration (BIR Form No. 2303)</u> together with your quote.

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