



PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City

ALTERNATIVE MODE

REQUEST FOR QUOTATION

No. RFQ-2022-456

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 SEPTEMBER 23, 2022.

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

Table with 9 columns: ITEM NO., QTY, UNIT, DESCRIPTION, ABC/UNIT, TOTAL ABC, BRAND/PACKAGING, UNIT COST, TOTAL COST. Contains 5 rows of item specifications.

TOTAL ABC 194,619.12

Terms and Conditions:

Supplies to be delivered should have at least one (1) year and longer expiry Staggered Delivery/Payment

Documentary Requirements:

- Nego. Proc (53.9) - Small Value
PhilGEPs Ref #: 9030280
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 BIR Certificate of Registration (BIR Form No. 2303) together with your quote.