



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

REQUEST FOR QUOTATION

No. RFQ-2022-706

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 Small Value Procurement **on or before December 26, 2022**

Please fax your quotation at 588-9997 or email at pemcproc@gmail.com / Attention: **Al Menor**

ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	Supplier's Offer		
						BRAND/ Specifications	UNIT COST	TOTAL COST
1	1	pc	Steel Cabinet, Stainless , five shelves for drugs and medicines	45,000.00	45,000.00			
2	4	pc	Whiteboard, 3ft x 6ft	2,000.00	8,000.00			
			Total Amount		53,000.00			
PCMC Requirement:						<i>Please indicate below your delivery period in number of days.</i>		
Delivery Period:								

Terms and Conditions:

Documentary Requirements:

Nego. Proc (SSG) - small value

Mayor's/ Business Permit

PhilGEPS Reg. No

Signature over Printed Name

Name of Supplier

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.*