

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

## REQUEST FOR QUOTATION No. RFQ-2023-072

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 <u>February 10, 2023</u>.

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

ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	UNIT COST	TOTAL COST
1	12	рс	Colored Ribbon (400 prints) for Hiti ID printer	8,400.00	100,800.00		
			plus PVC Cards (400pcs)				
2	2	set	Exchange Roller Kit, Canon Scanner DR-G2090	1,500.00	3,000.00		

TOTAL ABC

103,800.00

PCMC Requirement:	Please indicate below your
	delivery terms (in number of days)
Delivery Period: Seven (7) working days upon receipt of approved Purchase Order	

Documentary Requirements: Nego. Proc (53.9) - Small Value PhilGEPS Ref #: <u>9456445</u> 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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