



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

Philgeps: 9622167  
3/31 - 4/3/23

REQUEST FOR QUOTATION  
No. RFQ- 2023-209

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 on or before **April 3 2023.**

Please fax your quotation at 588-9997 or email at [danielrodriguez@gmail.com](mailto:danielrodriguez@gmail.com)/ [pcmcproc@gmail.com](mailto:pcmcproc@gmail.com) / Attention:

ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	BRAND/ PACKAGING	MANUFACTUR ER	UNIT COST	TOTAL COST
1	500	pc	Infusion Pump IV Set	152.00	76,000.00				
2	273	pc	Suction Liner, 1L with cannister	150.00	40,950.00				
					<b>116,950.00</b>				

<b>PCMC Requirement:</b>	<i>Please indicate below your delivery period in number of days.</i>
<b>Delivery Period:</b>	

**Terms and Conditions:**

Supplies to be delivered should have at least one (1) year and longer expiry  
Staggered Delivery and Staggered Payment for CY-2023

**Documentary Requirements:**

Nego. Proc (53.9) - Small Value  
PhilGEPS Ref#: \_\_\_\_\_  
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.

