



PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City

**ALTERNATIVE MODE**

**REQUEST FOR QUOTATION**

**No. RFQ-2023-487**

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 - Lease of Real Property Or Venue on or before **AUGUST 04, 2023**.

Please fax your quotation at **8588 9997** or email at [pcmcproc@gmail.com](mailto:pcmcproc@gmail.com) / Attention: **MS. LOVELY M. ALGODON**

ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	UNIT COST	TOTAL COST
			ANNUAL RETREAT OF RESIDENTS/FELLOWS AND TRANSFORMATION PROG. COMM. HEADS				
			August 26-27, 2023				
			Venue: Retreat Center				
			Vicinity: Tagaytay/Laguna/Batangas				
1	38	pax	Accommodation & Meals (3 meals)	2,000.00	76,000.00		
2	38	pax	Additional Meal (extension to lunch of Aug. 27)	260.00	9,880.00		
<b>TOTAL ABC</b>					<b>85,880.00</b>		

**Documentary Requirements:**

**Nego. Proc (53.10) - Lease of Real Property Or Venue**

PhilGEPS Ref #: **N/A**

Mayor's/ Business Permit

PhilGEPS Reg. No.

Income/Business Tax Return

\_\_\_\_\_  
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.

*M*