



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

REQUEST FOR QUOTATION
No. RFQ-2023-560

Date: _____
Name of Supplier: _____
Address: _____
Telephone No. _____

Please quote your lowest price as per specifications per item listed below thru Alternative Mode of Procurement - (SHOPPING - Sh 52.1b) on or before September 18, 2023.

Please fax your quotation at 8-588-9997 / 8-9240840 or email at pcmcproc@gmail.com c/o MARY ROSE P. ESTOR

ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	BRAND/PACKAGING	UNIT COST	TOTAL COST
1	4,550	pc	Pandesal, 35g/pc	4.00	18,200.00			
2	1,010	lf	Pullman, 21sl/lf	72.00	72,720.00			
			<ul style="list-style-type: none"> • Freshly baked • Delivery Schedule: Tuesday/Friday 5:30 AM • Staggered delivery/payment 					
			(FOR 4th QUARTER OF CY 2023 USAGE)					
TOTAL ABC					90,920.00			

Documentary Requirements:

Shopping (52.1b)

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 quo

Amor
9-12-2023