



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

**REQUEST FOR QUOTATION**  
**No. RFQ-2024-021**

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 January 16, 2024**

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

ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	Supplier's Offer		
						BRAND/ Specifications	UNIT COST	TOTAL COST
1	6	lot	Digital Trunked Radio Communication System for Ambulance Vehicles ( Rental )	16,040.00	96,240.00			
			For Three ( 3 ) units Portable, Three (3) units mobile and one (1) unit base radio					
<b>TOTAL ABC</b>					<b>96,240.00</b>			

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

**Terms and Conditions:**

**Documentary Requirements:**

Nego. Proc (53.9) - Small Value

PhilGEPS Ref#: \_\_\_\_\_

PhilGEPS Reg. No

Mayor's/ Business Permit

ITR [for ABC above 500k] not required

Omnibus Sworn Statement [for ABC above 500k] not required

*Amn*  
1-12-2024

\_\_\_\_\_  
 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.*