



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

REQUEST FOR QUOTATION
 No. RFQ- 2024-061

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 **February 12, 2024.**

Please fax your quotation at 588-9997 or email at danilonrodriguez@gmail.com/ pcmcproc@gmail.com / Attention:

ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	BRAND/ PACKAGING	MANUFACTURER	UNIT COST	TOTAL COST
1	52	pc	Ethylene Oxide Gas Cartridge 170g (8-170)	1,595.00	82,940.00				
2	1	rl	Indicator, Gas (Tape, EO Gas)	506.00	506.00				
3	2	bx	Indicator, Gas Chemical Strips	3,185.00	6,370.00				
					89,816.00				

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

Terms and Conditions:

Supplies to be delivered should have at least one (1) year and longer expiry
 Staggered Delivery and Staggered Payment for CY-2024

Documentary Requirements:

Nego. Proc (53.9) - Small Value
 PhilGEPS Ref#: _____
 Mayor's/ Business Permit
 PhilGEPS Reg. No

10537095 2/8 - 2/12/24 *Handwritten signature* 2-7-2024

 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.*