



PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City

ALTERNATIVE MODE

REQUEST FOR QUOTATION

No. RFQ-2024-304

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 - Small Value) on or before  JUNE 10, 2024 .

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	SUPPLIER'S OFFER	
						UNIT COST	TOTAL COST
1	650	pd	PCMC Parking Ticket, one color print with numbering and perforation, 100pcs/pd, size; 9.5 x 3.5, materials: book 40 lbs	80.00	52,000.00		
			(See attached design and layout)				
<b>TOTAL ABC</b>						<u><u>52,000.00</u></u>	

*Please indicate your Delivery Terms (in number of days)*

**Delivery Period:** \_\_\_\_\_

**Documentary Requirements:**

Nego. Proc (53.9) - Small Value

PhilGEPS Ref #: 10930851

Mayor's/ Business Permit

PhilGEPS Reg. No

ITR [for ABC above 500k]

Omnibus Sworn Statement [for ABC above 500k]

*CMC 4-6-2024*

\_\_\_\_\_  
 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.

