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

REQUEST FOR QUOTATION
No. RFQ-2024-381

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 July 19, 2024.**

Please **fax your quotation at 8588-9997 / 8924-0840** or email at **pcmcproc@gmail.com** c/o **JULIUS LUCAS**

ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	BRAND/ PACKAGING	UNIT COST	TOTAL COST
1	900	rl	Adhesive, Transparent tape 1" 50m	10.09	9,081.00			
2	40	cn	Air Freshener 280ml/cn	90.22	3,608.80			
3	700	pc	Eraser, correction tape roller, 5mmx8m	17.50	12,250.00			
4	60	pc	Eraser, rubber	6.00	360.00			
5	5,000	pc	Folder, tagboard, long	4.14	20,700.00			
6	15	bt	Ink, Stamp Pad 1oz 30ml purple	28.00	420.00			
7	2,600	rm	Paper, Copy A4, S-24, 80gsm	213.80	555,880.00			
8	650	rm	Paper, Copy long, S-24, 80gsm	232.96	151,424.00			
9	132	pc	Pen, Highlighter (yellow, green, orange,pink)	15.56	2,053.92			
10	200	pc	Pencil, with eraser # 1	6.20	1,240.00			
11	3	rl	Plastic Straw, large 1kg	72.00	216.00			
12	200	pc	Record Book, 300pp	91.70	18,340.00			
13	15	pc	Stapler, Heavy Duty desk type (20shts cap)	176.80	2,652.00			
14	50	pc	Clip, Paper plastic coated (Big) 100s	17.00	850.00			
			TOTAL ABC		**779,075.72**			

PCMC Requirement:	Please indicate below your delivery period in number of days.
Delivery Period: **Seven (7) working days.**	

(signature) 7-15-2024

Documentary Requirements:
Shopping (52.1b)
PhilGEPS Ref No.:
Mayor's/ Business Permit
PhilGEPS Reg. No.:
Omnibus Sworn Statement [for ABC above 500k]

_____
_____
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.

PDAL-PCMC-RQF3
050422 Rev 2