



PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City

ALTERNATIVE MODE

REQUEST FOR QUOTATION

No. RFQ-2025-034

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 **JANUARY 31, 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	1	lot	WHO Classification of Tumours Online Reference for 10 User Licenses	112,500.00	112,500.00			
<b>TOTAL ABC</b>						<b>112,500.00</b>		

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

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

**Documentary Requirements:**

Nego. Proc (53.9) - Small Value

PhilGEPS Ref #: **11697828**

Mayor's/ Business Permit

PhilGEPS Reg. No

ITR [for ABC above 500k]

Omnibus Sworn Statement [for ABC above 50k]

\_\_\_\_\_  
 \_\_\_\_\_  
 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.