



PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City

ALTERNATIVE MODE

REQUEST FOR QUOTATION

No. RFQ- 2025-101

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 **March 10, 2025.**

Please fax your quotation at 588-9997 or email at [danilonrodriguez@gmail.com](mailto:danilonrodriguez@gmail.com)/ [pcmcproc@gmail.com](mailto:pcmcproc@gmail.com) / Attention: \_\_\_\_\_

ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	BRAND/PACKAGING	MANUFACTURER	UNIT COST	TOTAL COST
1	20	pc	Blanket, full body (adult) for temperature management unit (compatible with 3M Bair Hugger)	1,087.09	21,741.80				
2	100	pc	Cautery Cord. Disposable	380.00	38,000.00				
3	3	pc	Cerclage Pessary, size R4	4,500.00	13,500.00				
4	3	pc	Cerclage Pessary, size R5	4,500.00	13,500.00				
5	1200	pc	Condom (1)	8.50	10,200.00				
6	36	rl	Indicator, tape, Plasma	2,000.00	72,000.00				
7	3	pc	Vacuum Delivery System, 50mm	4,200.00	12,600.00				
8	3	pc	Vacuum Delivery System, 60mm	4,200.00	12,600.00				

**194,141.80**

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

**Terms and Conditions:**

Supplies to be delivered should have at least one (1) year and longer expiry  
Staggered Delivery and Staggered Payment for CY-2025

**Documentary Requirements:**

Nego. Proc (53.9) - Small Value

PhilGEPS Ref#:

Mayor's/ Business Permit

PhilGEPS Reg. No

*Handwritten signature and date: 8-5-2025*

\_\_\_\_\_  
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.