PHILIPPINE CHILDREN'S MEDICAL CENTER



Quezon Avenue, Quezon City
ALTERNATIVE MODE

REQUEST FOR QUOTATION No. RFQ- 2025-141

Addr	e of Sup									
Nego	tiated Pr	rocurer	owest price as per specifications per itemment on or before March 21, 2025. Otation at 588-9997 or email at danilon					1:		
ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	BRAND/ PACKAGING	MANUFACTUR ER	UNIT COST	TOTAL COST	
1	36	рс	Cartridges Heparin Assay 1.0-1.5 mg/kg (Yellow HPT) compatible with HMS machine box of 9's	800.00	28,800.00					
2	90	рс	Cartridges Heparin Assay 2.5-4.0 mg/kg (Blue HPT) compatible with HMS Machine box of 9s	800.00	72,000.00					
3	36	рс	Cartridges Heparin Dose Response (Red HDR) compatible with HMS machine box of 9's	900.00	32,400.00					
4	18	рс	Cartridges High Range ACT compatible with HMS machine box of 18s	500.00	9,000.00					
5	3	рс	Valve, 3D Annuloplasty Rings Tricuspid (26 to 34 mm) and Mitral (26 to 34mm)	35,000.00	105,000.00					
6	3	рс	Valve, Bioprosthetic Porcine Aortic (sizes 21 to 25 mm) and Mitral (sizes 23 to 29 mm)	68,000.00	204,000.00					
7	2	рс	Valve, Mechanical Open Pivot Aortic (sizes 15 to 28 mm) and Mitral (sizes 23 to 29 mm)	68,000.00	136,000.00					
					587,200.00					
PCMC Requirement:							Please indicate below your delivery period in number of days.			
Delivery Period:										
	Suppli Stagge Docum	es to be red De	Conditions: be delivered should have at least one (belivery and Staggered Payment for CY ry Requirements: 53.9) - Small Value		longer expiry		ant ,	- 17- 100	·	
	PhilGE	EPS Re's/ Bus	ef#: siness Permit				•	-17-202	ı	
-	ure over I of Suppli		Name							

*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 <u>BIR Certificate of Registration (BIR Form N. 2303)</u> together with your quote.

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