



PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City

ALTERNATIVE MODE

REQUEST FOR QUOTATION

No. RFQ-2025-146

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 **MARCH 28, 2025**.

Please fax your quotation at 8588-9997 or email at [procurement@pcmc.gov.ph](mailto:procurement@pcmc.gov.ph) / Attention: **MS. LOVELY M. ALGODON**

ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	SUPPLIER'S OFFER		
						UNIT COST	TOTAL COST	
1	700	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	56,000.00			
<b>TOTAL ABC</b>						<b>56,000.00</b>		

Please indicate your Delivery Terms (in number of days)  
Delivery Period: \_\_\_\_\_

- Documentary Requirements:**  
 Nego. Proc (53.9) - Small Value  
 PhilGEPS Ref #: **11909382**  
 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.