



PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City

ALTERNATIVE MODE

REQUEST FOR QUOTATION

No. RFQ-2025-185

Date:

Name of Supplier:

Address:

Telephone No.

Please quote your lowest price as per specifications per item listed below thru Mode of Procurement - Small Value Procurement) on or before **APRIL 28, 2025**.

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

ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	SUPPLIER'S OFFER		
						Specifications	UNIT COST	TOTAL COST
1	18	host	Virtual Platform, Zoom Meeting, Business Plan, 1 Year Subscription, Includes 300 participants, Polling/Breakout Room, Admin Dashboard (Renewal)	11,545.16	207,812.88			

Please indicate your Delivery Terms (in number of days)

Delivery Period:

Documentary Requirements:

Small Value Procurement

PhilGEPS Ref #: **11979356**

Mayor's/Business Permit

PhilGEPS Reg. No.

ITR [for ABC above 500k]

Omnibus Sworn Statement [for ABC above 50k]

4-22-2025

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.*