



**REQUEST FOR QUOTATION**  
**PR NO. 25-08-1256**

The Valenzuela Medical Center (VMC) through its Bids and Awards Committee (BAC) intends to procure the **"SUPPLY AND DELIVERY OF ONE (1) UNIT 1-SEATER RECLINING CHIAIR"** for the **Cancer Care Unit** in accordance with Section 34.1 (Small Value Procurement) of the Implementing Rules and regulations of the Republic Act No. 12009.

Please send your **price offer** for the items listed below duly signed by you or your authorized representative not later than **September 11, 2025 10:00am**. The VMC-BAC, reserves the right to accept, reject & waive defects in the canvass.

ITEM NO.	UNIT	ITEM DESCRIPTION	QTY.	UNIT COST	TOTAL COST
1	unit	<b>1 SEATER RECLINING CHAIR</b>	3	14,805.67	44,417.01
		Padded Recliner back			
		Overstuffed Armrest			
		Adjustable Footrest			
		<b>MEASUREMENT:</b>			
		Width 73cm – 95 cm			
		Length 86cm-104cm			
		Height 83-106 cm			
		<b>Materials:</b>			
		Frame: Plywood & Gemelina wood			
		Fixed Seat Cushion: Polyurethane foam			
		Fixed Arm Cushion: Polyurethane foam			
		Fixed Back Cushion: Polyester fiber			
		Fabric: 100% Polyester			
		Back Type: Fixed Back Cushion			
		Seat Type: Fixed Seat Cushion			
		<b>Care and Maintenance</b>			
		Vacuum Clean			
		Wipe with a damp cloth			
		Easy to clean			
		<b>GRAND TOTAL</b>			<b>44,417.01</b>

Copies of the following documentary requirements such as Certificate of Registration from BIR, Securities and Exchange Commission (SEC), Department of Trade and Industry (DTI) registration, Business/Mayor's Permit with O.R. renewal, Valid Philgeps Certificate, Updated Tax Clearance Certificate,

*"PHIC Accredited Healthcare Provider"*  
*"Valenzuela Medical Center...Where your health matters most"*



Address: **Padrigal St., Karuhatan, Valenzuela City, 1441**  
Telephone Nos: **8294-6711 to 17**  
Director's Office Direct Line: **8291-4259**  
Email Address: **valgen\_hosp@yahoo.com**  
Website: **<https://vmc.doh.gov.ph/>**



Republic of the Philippines  
Department of Health  
Metro Manila Center for Health Development  
**VALENZUELA MEDICAL CENTER**



and Notarized Hard Copy of Omnibus Sworn Statement are also required to be submitted along with your quotation/proposal.

Proposal may be submitted manually at the BAC Secretariat, Procurement Office, Valenzuela Medical Center, Padrigal St., Karuhatan, Valenzuela City or through email at [vmc\\_bac@yahoo.com](mailto:vmc_bac@yahoo.com). For any clarification, you may call **Ms. Christallyne Castro** at telephone no. **8294-46-25** or via email at [vmc\\_bac@yahoo.com](mailto:vmc_bac@yahoo.com).

**LIGAYA E. UBALDE, MPA**  
Head, BAC Secretariat / Procurement

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