



Republic of the Philippines
DEPARTMENT OF HEALTH
PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City 1100
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NOTICE OF AWARD
NOA-2022-011

MARSMAN DRYSDALE MEDICAL PRODUCTS, INC.

G/F Molave Building, 2231 Chino Roces Avenue,
Makati City
Tel. No. (632) 751-9999 / 817-8405
E-mail Add: mmdmpi@marsmandrysdale.com

Dear Sir / Madam:

This is to inform you that based on the result of the Public Bidding conducted on November 8, 2021 for the project stated below under Invitation to Bid No. IB 2022-014, your proposal was found to be the Lowest Calculated and Responsive Bid (LCRB):

ITEM DESCRIPTION	TOTAL COST
One (1) Lot Supply and Delivery of reagents/ consumables under Reagent Tie-up Agreement for Three (3) Years for Automated Hematology Analyzer <i>(Refer to Terms of Reference and Annex "A" for detailed offer)</i>	Php4,900,272.00 year-

You are hereby required to provide on or before 24 JAN 2022 the following:

1. Necessary contract for this purpose
2. Payment of Performance Security in **either** of the following forms:

FORM OF PERFORMANCE SECURITY	AMOUNT OF PERFORMANCE SECURITY
a) Cash or cashier's/ manager's check issued by a Universal or Commercial Bank	Five percent (5%) <u>Php245,013.60</u>
b) Bank draft/guarantee or irrevocable letter of credit issued by a Universal or Commercial Bank: Provided, however, that it shall be confirmed or authenticated by a Universal or Commercial Bank, if issued by a foreign bank	
c) Surety bond callable upon demand issued by a surety or insurance company duly certified by the Insurance Commission as authorized to issue such security.	Thirty percent (30%) <u>Php1,470,081.60</u>

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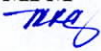
**One (1) Lot Supply and Delivery of reagents/ consumables under Reagent Tie-up Agreement for Three (3) Years for Automated Hematology Analyzer
MARSMAN DRYSDALE MEDICAL PRODUCTS, INC.**

Failure to provide the Performance Security and/or contract shall constitute sufficient ground for cancellation of the award and imposition of penalties/forfeiture corresponding to the Bid Security posted.

Very truly yours,



SONIA B. GONZALEZ, MD, MScHSM, MPM
Officer-in-Charge, Executive Director



Conforme:

This is to certify that the company has authorized me to accept this award, sign all related documents and hold the

I further certify that I have chosen the following

- Bank Guarantee
- 1% Deduction from claims on the first payment for staggered deliveries

Authorized Signatory (Signature over printed name)

Designation

Date