

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

Quezon Avenue, Quezon City 1100
website: www.pcmc.gov.ph email: officeofthedirector@pcmc.gov.ph
Trunkline: 8588-9900 DirectLine: 8924-0836 Fax No: 8924-0840

NOTICE OF AWARD NOA-2022-057

RBGM MEDICAL EXPRESS SALES INC.

138 Maginhawa St., Teachers Village Quezon City

Tel. No.: 8426-0268

E-mail Addresses: bidding@rbgm-medical.com

Dear Sir / Madam:

This is to inform you that based on the result of the conducted Public Bidding for the project stated below under Invitation to Bid No. IB-2021-157 as per BAC Resolution No.R2022-02-078, your proposal was found to be responsive.

QTY U	JNIT	ITEM DESCRIPTION	TOTAL COST (Php)
1	unit	VIDEOLARYNGOSCOPE Brand:8403ZXK CMAC VIDEO Laryngoscope, KARL STORZ CMAC (see Annex "A" for detailed specifications)	Php1,861,100.00

You are hereby required to provide on or before 2 8 FEB 2022 the Performance Security in either of the following form:

FORM OF PERFORMANCE SECURITY	AMOUNT OF PERFORMANCE SECURITY (Equal to Percentage of the Total Contract Price)
a) Cash or cashier's/ manager's check issued by a Universal or Commercial Bank	Five percent (5%)
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	Php93,055.00
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%) Php558,330.00

NOTICE OF AWARD NOA-2022-057 RBGM MEDICAL EXPRESS SALES INC.

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

We will furnish you the approved Purchase Order (PO) upon receipt of funds from the Department of Budget and Management (DBM)

SONIA B. GONZALEZ, MD MScHSM, MPM OIC. Executive Director
SONIA B. GONZALEZ, MD MScHSM, MPM
OIC, Executive Director
Conforme:
This is to certify that the company has authorized me to accept this award, sign all related documents and
Authorized Signatory (Signature over printed name)
Date