



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-2022-128

GLOBO ASIATICO ENTERPRISES INC.

127 JDK Bldg. Maginhawa Street,

Teachers Village, Quezon City

Tel. No. 982-7000 / 982-7086

Fax No. 433-0651 / 436-5833

Dear Sir / Madam:

Please be informed that we are procuring the following services to you through Direct Contracting per RFQ (DC) 2022-037.

Item No.	QTY	UNIT	ITEM DESCRIPTION	OFFER	UNIT COST	TOTAL AMOUNT
1	63	pc	Cartridges Heparin Assay 0.0-1.5 mg/kg (Yellow HPT) compatible with HMS machine box of 9s	Heparin Assay Yellow 0 .0 –1.5mg/kg 4-channel cartridge, HMS Cartridge, Medtornic, USA	800.00	50,400.00
2	140	pc	Cartridges Heparin Assay 2.5-4.0 mg/kg (Blue HPT) compatible with HMS Machine box of 9s	Heparin Assay Blue 2.5-4.0 mg/kg 4 -channel cartridge, HMS Cartridge, Medtornic, USA	800.00	112,000.00
3	56	pc	Cartridges Heparin Dose Response (HDR) compatible with HMS machine box of 9s	Heparin Dose Response (HDR) 6-channel cartridge , HMS Cartridge, Medtornic, USA	900.00	50,400.00
4	63	pc	Cartridges High Range ACT compatible with HMS machine box of 18s	High Range (HR ACT) 2-channel cartridge , HMS Cartridge, Medtornic, USA	500.00	31,500.00
				TOTAL AMOUNT		244,300.00

Terms and Conditions :

» Supplies to be delivered should have expiration of at least one (1) year and longer or as expressed/required by the End-user.

» The price of the quoted item(s) shall be valid until December 31, 2022.

» Staggered delivery staggered payment.

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Terms and Conditions :

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| » The supplier should submit Materials Safety Data Sheet upon initial delivery, if applicable. |
| » The supplier should deliver the goods called for in the Purchase Order (PO) within 7 working days upon receipt of approved Delivery Order Slip (DOS) through fax or personal received during office hours at the Procurement Division. |
| » PCMC has the right to reject any or all bids without offering any reason, waive any required formality and award the contract to any bidder whose proposals as evaluated by PCMC is the most advantageous to the government. |


SONIA B. GONZALEZ, MD MScHSM, MPM
Executive Director 

Conforme:

This is to certify that the company has authorized me to accept this award, sign all related documents and hold the company bound by rules and laws applicable thereto.

I further certify that I have chosen the following mode (as checked) as the form of retention money required of us under R.A. 9184 Sec. 62.1.

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

Authorized Signatory
(Signature over printed name)

Designation

Date