



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

Quezon Avenue, Quezon City 1100  
website: [www.pcmc.gov.ph](http://www.pcmc.gov.ph) email: [officeofthedirector@pcmc.gov.ph](mailto:officeofthedirector@pcmc.gov.ph)  
Trunk Line: 8588-9900 to 20 Direct Line: 8924-6601

**NOTICE OF AWARD**  
NOA-2023-087

**SAVIOUR MEDEVICES, INC.**  
5<sup>th</sup> Floor BTTC Centre Ortigas Ave.,  
Greenhills, San Juan City  
Tel No.: 8706-7990 to 93  
Email Add.: [equipmentsec@saviourmedevices.ph](mailto:equipmentsec@saviourmedevices.ph)

Dear Sir / Madam:

This is to inform you that based on the result of the conducted Competitive Bidding for the project stated below under Invitation to Bid No. IB-2023-041 as per BAC Resolution No. R2023-03-197, your proposal was found to be responsive.

ITEM DESCRIPTION	TOTAL COST
<b>Supply and Delivery of One (1) Lot Portable Handheld Ultrasound Brand/Model: PHILIPS / LUMIFY S4-1 &amp; L-12-4 TRANSDUCER</b> <i>(see Annex "A" for detailed specification)</i>	<b>Php988,000.00</b>

You are hereby required to provide on or before 22 APR 2023 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>Php49,400.00</b>
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%) <b>Php296,400.00</b>

**NOTICE OF AWARD**  
**NOA-2023-087**  
**SAVIOUR MEDEVICES, 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).

Very truly yours,

  
**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.

\_\_\_\_\_  
Authorized Signatory (Signature over printed name)

\_\_\_\_\_  
Designation

\_\_\_\_\_  
Date