



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
Trunk Line: 8588-9900 to 20 Direct Line: 8924-6601

NOTICE OF AWARD
NOA-2023-152-005

GENZEN PHARMACEUTICAL TRADING
890 Purok 4, Longos,
Calumpit,
Bulacan,
Tel. No. (044) - 8128355

Dear Sir / Madam:

This is to inform you that based on the result of the Public Bidding conducted on August 1, 2023, for Various Pharmaceutical Supplies CY2023 under Invitation to Bid No. IB-2023-089, as per BAC Resolution No. R2023-08-475, your proposal was found to be the Lowest Calculated and Responsive Bid (LCRB):

| SET | ITEM NO. | QTY | UNIT | ITEM DESCRIPTION | BRAND, PACKING, SPECIFICATION, ETC. | | MANUFACTURER | UNIT COST | TOTAL AMOUNT |
|-----|----------|--------|------|--|---|---------|---|-----------|--------------|
| A | 6 | 2,500 | tab | Allopurinol tab 100mg blister/foil pack | Alu/PVC Blister Pack x 10's (Box of 100's) | Urisol | Centurion Lab. (Division of Centurion Remedies Pvt. Ltd.) | 4.50 | 11,250.00 |
| A | 9 | 4,500 | cap | Amoxicillin Trihyd cap 500mg blister/foil pack | Alu/Clear PVC Blister Pack x 10's (Box of 100's) | Ambimox | CSPC Zhongnuo Pharmaceutical(Shijiaz huang)Co.,Ltd. | 3.00 | 13,500.00 |
| A | 15 | 60,000 | tab | Ascorbic Acid tab 500mg blister/foil pack | Alu/ Deep Red PVC Blister Pack x 20's (Box of 100's, 200's and 500's) | Enocee | Azarias Pharmaceutical Laboratories, Inc. | 4.00 | 240,000.00 |
| A | 38 | 8,000 | tab | Ciprofloxacin HCl tab 500mg blister/foil pack | PVC/Blister Pack x 10's (Box of 100's) | Cyfrog | CSPC Ouyi Pharmaceutical Co., Ltd | 8.00 | 64,000.00 |
| A | 51 | 20 | amp | Digoxin amp 250mcg/mL, 2mL (IM,IV) | Clear Glass Ampoule with Snap off Label x 2mL Box of 10's | Dixin | Samarth Life Sciences Pvt. Ltd (Unit II) | 310.00 | 6,200.00 |



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|-----|----------|-------|------|--|--|---|-----------|--------------|
| A | 144 | 1,500 | amp | Tranexamic Acid amp 100mg/mL, 5mL (IM, IV) | USP Type I Flint glass ampoule x 5mL (Box of 10 ampoules in PVC tray; USP Type I Flint glass ampoule x 2.5mL (Box of 10 ampoules in PVC tray; Box of 5 ampoules in PVC tray) | Tranesaph Kilitch Drugs (India) Ltd. | 23.00 | 34,500.00 |

GRAND TOTAL = Php 369,450.00

Terms and Conditions :

1. The prices of the awarded item(s) shall be valid until December 31, 2023.
2. Conforms on the attached Terms of Reference, if applicable
3. Staggered delivery, staggered payment.
4. Delivery Schedule: Within Seven (7) working days upon receipt of Delivery Order Slip.
5. Drugs and Medicines to be delivered should have expiration of at least one (1) year and longer or as expressed/required by Pharmacy Division.
6. The quantities specified are estimated requirements during the period and may be decreased depending upon the actual need of PCMC. It is understood therefore that PCMC is not bound to order / purchase all the items / quantities called for on this Notice of Award.
7. The supplier should submit Materials Safety Data Sheet upon initial delivery, if applicable.

You are hereby required to provide on or before 16 SEP 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%) Php18,472.50 |
| 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%) Php110,835.00 |

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.

Very truly yours,

SB/sonia
SONIA B. GONZALEZ, MD, MSChSM, MPM
 Executive Director *SB*

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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