



Republic of the Philippines
PHILIPPINE CHILDREN'S MEDICAL CENTER
 Quezon Ave. Quezon City
 Tel. No.: 8588-9900 loc. 224, 226, 361, 355
 Fax no.: 85889997 • e-mail: pcmcproc@gmail.com

PURCHASE ORDER **Nº 72737**
FOR SUPPLIES OR EQUIPMENT
 P. R. NO. MMD-CNM-2022-05 Dated: 09/15/2021
 MODE OF PROCUREMENT Public Bidding 10/08/2021
 CS No. AC No. NOA-2022-045
 DATE OF P.O. January 17, 2022

TO: Supplier/Dealer Contractor **BRITESKY ENTERPRISES**
 Address: Blk 150 Lot 22 Contrena St. Central Bicutan, Taguig City

Department/Office/Division/Section/Unit where delivery
 Is to be made: Supply & Property Section
 Location: Ground Floor, PCMC Bldg.
 Special Instructions
 Delivery period: 7 working days
 Performance Security Posted: Surety Bond No. _____
 Cash / Cashier's / Manager's Check No. _____
 PCMC O.R. No. _____ Amount P _____

Item No.	QTY.	UNIT	ARTICLES	UNIT COST	TOTAL COST
1	24,000	pk	Paper Towel, Regular 1 ply, 175 sheet, 30 pk/cs (T.O.R)- Supplier to provide, dispenser) 30 packs/ box Sheet size: 195 x 210mm, Donation 10 pieces dispenser for 24,000 packs For the use of MMD-CNM xxxxxxxxxxxxxxxxxxxNothing Follow xxxxxxxxxxxxxxxxxxx	34.18	820,320.00
Terms and Conditions: 1. The prices of the awarded item's shall be valid until December 31, 2022 2. Conformance on the attached Terms of Reference if applicable 3. Staggered delivery, Staggered payment 4. Delivery Schedule: within Seven Working days upon receipt of Delivery Order Slip 5. The quantities specified are estimated requirements during the period and may be decreases 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 6. The supplier should submit Materials Safety Data Sheet upon initial delivery, if applicable 7. PCMC has the right to reject or cancel any items in this PO for justifiable and reasonable ground where the award will not benefit the Government Penalty Clause for Delayed or Unsatisfactory Deliveries 1. One-tenth (1/10) of one percent (1%) of the cost of unperformed portion for every day of delay, but not to exceed ten percent 10% of the total contract price; and 2. Excess in price, if procured from third parties, through alternative mode of procurement; and 3. In case of bidding, forfeiture of performance bond equal to 5% of the undelivered item/s					

Funding Code 5-02-03-990 *md 1/19/22* **TOTAL AMOUNT P** 820,320.00

FUNDS AVAILABLE: ₱ 820,320 -
ODETH A. VILLEGAS, CPA, MBA
 Chief Accountant *1/20*
 APPROVED:
SONIA B. GONZALEZ, M.D, MSChSM, MPM
 OIC- Executive Director *M JMS*
 Attachments:
 P.R. No. MMD-CNM-2022-01
 Abstract of Canvass/Bids
 Canvass Sheet/Tender of Bids
 Notarized Certification of Exclusive Distributor
 Justification
 Others _____
 Reso # R2022-00-045
 NOA-2022-045

CERTIFICATION
This is to certify that I received today the copy of this Purchase Order, and held the Company bound by the terms and stipulation of the contract and other laws applicable.

 (Signature over printed name)
 Date: _____

Distribution : White (Original) - Attachment to payment
 Yellow (Duplicate) - Procurement
 Pink - Supply and Property



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 TO PROCEED
NTP-PROC-2022-067



January 17, 2022

BRITESKY ENTERPRISES
Blk. 150 Lot 22 Contreras St.
Central Bicutan Taguig City
Tel: 0906-4860 Fax: 837-9562

Sir/Madam:

This is to inform you that Purchase Order No. 72737, as a result of Public Bidding for the Procurement of 24,000 pk Paper Towel, Regular 1 ply, 175 sht, 30 pkcs (T.O.R.-Supplier to provide dispenser) 30 packs/box - Sheet Size: 195 x 210mm. Donation 10 pcs dispenser for 24,000 packs has been approved.

You may now proceed with the delivery of the items listed in the attached Purchase Order within Seven (7) working days from receipt of this notice and/or Delivery Order Slip for Staggered Delivery.


SONIA B. GONZALEZ, M.D., MHcHSM, MPM
OIC-Executive Director 

CONFORME:
Received Original

Signature Over Printed Name
Authorized Representative
Date: _____