



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 73352 N^o 73352
FOR SUPPLIES OR EQUIPMENT
P. R. NO. **PHAR-2022-006-RF** Dated: 4/5/22
MODE OF PROCUREMENT
PUBLIC BIDDING
CS No. _____ AC No. _____
DATE OF P.O. **June 16, 2022**

TO: Supplier/Dealer Contractor **RBC-MDC CORPORATION (RBCJ PHARMACY)**
Address: **RBC-Corporate Center, Don Jesus Blvd., Alabang Hills, Cupang, Muntinlupa City**

Department/Office/Division/Section/Unit where delivery
Is to be made: Materials Management Division
Location: Ground Floor, PCMC Bldg.
Special Instructions _____
Delivery period: 7 working days
Performance Security Posted: Surety Bond No. 6(13) 279453
 Cash / Cashier's / Manager's Check No. _____
PCMC O.R. No. _____ Amount P 24,300.00

Item No.	QTY.	UNIT	ARTICLES	UNIT COST	TOTAL COST
1	9,000	tab	<p>Topiramate tab 25mg blister/foil pack "Topirol 25" 25mg Film-Coated Tablet Alu/PVC Amber Opaque Bister Pack x 10's (Box of 50's) [Sun Pharmaceutical Industries Ltd.]</p> <p>Conforme to the attached Terms of Reference For the use of Pharmacy Division (CY-2022) To be sourced from Revolving Fund (RF) <i>All deliveries shall have at least One (1) year expiration period.</i></p>	9.00	81,000.00 vvvvvvvvvvv (Eighty One Thousand Pesos only)

Penalty Clause for Delayed or Unsatisfactory Deliveries:
1. One-tenth (1/10) of one percent (1%) of the cost of unperformed portion for everyday of delay. Once the cumulative amount of liquidated damages reaches 10% of the amount of the contract, the Procuring Entity may rescind or terminate the contract, without prejudice to other courses of action and remedies available under the circumstances.
2. Excess in price, if procured from third parties, through alternative mode of procurement; and
3. In case of bidding, forfeiture of performance security equal to 5% of the undelivered item/s.

Additional instructions & conditions:
1. Staggered Delivery/Payment
2. Delivery will take effect upon receipt of Delivery Confirmation of Quantity/Date
3. Delivery is within 7 working days upon receipt of Delivery Confirmation
4. 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
5. Terms and conditions specified on Notice of Award.

Funding Code 2-01-01-010-002 *indicated*
TOTAL AMOUNT P 81,000.00

FUNDS AVAILABLE: ₱ 81,000.00
Rowel G. Alday
ROWEL G. ALDAY, CPA
OIC, Accounting Division

APPROVED:
Sonia B. Gonzalez
SONIA B. GONZALEZ, MD, MSChSM, MPM
Executive Director

- Attachments:
- P.R. No. **PHAR 2022-006-RF**
 - Abstract of Canvass/Bids
 - Canvass Sheet/Tender of Bids
 - Notarized Certification of Exclusive Distributor
 - Justification
 - Others
- x **BAC Reso No.2022-06-261**
x **NOA-2022-110-005**
x **NTP-PROC-2022-314**

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

4/22



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-2022-314

June 16, 2022

RBC-MDC CORPORATION (RBCJ PHARMACY)

RBC-Corporate Center, Don Jesus Bldv.,

Alabang Hills, Cupang, Muntinlupa City

Tel. No. (02) 772-1465

Fax No. (02) 842-5062

Sir/Madam:

This is to inform you that Purchase Order No. 73352 as a result of Public Bidding for the procurement of Various Pharmaceutical Supplies 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, MD, MScHSM, MPM
Executive Director

CONFORME:
Received Original

Signature Over Printed Name

Authorized Representative

Date: _____

