



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 74348**
 FOR SUPPLIES OR EQUIPMENT
 P. R. NO. PathoBB-2022-09 Dated: June 20, 2022
 MODE OF PROCUREMENT
PUBLIC BIDDING
 CS No. _____ AC No. _____
 DATE OF P.O. Jan. 6, 2023

TO: Supplier/Dealer Contractor **OMNIBUS BIO-MEDICAL SYSTEMS INC.**
 Address: 1052 Sitio 2, Bahay Pare, Candaba, Pampanga
 Tel. No.: 8961-7033 Email Add: sales@omnibus.ph / lfernandez@omnibus.ph

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 Other Terms: _____
 Performance Security Posted: Surety Bond No. Bank Guarantee
 Cash / Cashier's / Manager's Check No. SBC Ref. No. ISB-130023000048
 PCMC O.R. No. _____ Amount P 84,650.00

Item No.	QTY.	UNIT	ARTICLES	UNIT COST	TOTAL COST
	1	unit	Supply and Delivery of Plasma Thawer Brand/Model: Barkey Plasmatherm I. Specifications: 1 Adjustable temperature ranging from 37°C to 45°C 2 Easy to use 3 LCD display: 7 x 3.5cm Large display Text can be easily read 4 Can process four to eight (4-8) blood bags in a span of one (1) hour or less 5 With sensor and alarm: Any detected leakages Once thawing process is finished 6 Easy to clean 7 Dimension (WxDxH): 340x600x320mm 8 Weight: 18kgs 9 The unit is operated at 230 volts, 3-pin power plug/cable, strictly at 60 hertz 10 Power consumption: 7A at 230 VAC 11 Mechanical part is heavy-duty durable type 12 Equipment is maintainable and serviceable II. Accessories PER UNIT 1 One (1) 1KVA AVR Brand: SECURE Model: SVC-1000W Will provide safety electrical devices compatible to the equipment power requirement and proper grounding when needed	697,000.00	697,000.00 vvvvvvvvvvvv (Six Hundred Ninety-Seven Thousand Pesos)

-page 1 of 3

Funding Code _____ **TOTAL AMOUNT P** 697,000.00

FUNDS AVAILABLE:
LOURDES B. DELOS REYES, CPA
 Chief Accountant

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

Attachments:
 P.R. No. PathoBB-2022-09
 Abstract of Canvass/Bids
 Canvass Sheet/Tender of Bids
 Notarized Certification of Exclusive Distributor
 Justification
 Others NOA-2022-197
NTP-PROC-2023-006
BAC Reso No. R2022-12-659

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
PHILIPPINE CHILDREN'S MEDICAL CENTER
 Quezon Ave., Quezon City
 Tel. No.: 588-9900 loc. 224, 226, 390

PURCHASE ORDER **74348**
 FOR SUPPLIES OR EQUIPMENT
 P.R. NO. PathoBB-2022-09 / Dated: June 20, 2022 /
 MODE OF PROCUREMENT
PUBLIC BIDDING /
 CS No. _____ AC No. _____
 DATE OF P.O. Jan. 6, 2023 /

TO: Supplier/Dealer Contractor **OMNIBUS BIO-MEDICAL SYSTEMS INC.** /
 Address: 1052 Sitio 2, Bahay Pare, Candaba, Pampanga
 Tel. No.: 8961-7033 Email Add: sales@omnibus.ph / lfernandez@omnibus.ph
 Department/Office/Division/Section/Unit where delivery _____ Delivery period: 7 working days Other Terms: _____
 Is to be made: _____ Bidder's Bond Posted: Cash GSIS Policy Bank Guarantee
 Location: Materials Management Division Cashier's / Manager's / Cert Check No. 150-1300 23 0000 48
 Special Instructions: Ground Floor, PCMC Bldg. PCMC O.R. No. _____ Amount P 34,000.00

Item No.	QTY.	UNIT	ARTICLES	UNIT COST	TOTAL COST
	1	unit	Supply and Delivery of Plasma Thawer Brand/Model: Barkey Plasmatherm III. Warranty: > One (1) year warranty on parts, accessories and services / > With annual preventive maintenance / IV. With duly notarized certificate from Distributor - OMNIBUS BIO-MEDICAL SYSTEMS INC. / <i>Certifies that:</i> i. Parts and accessories and consumables are readily available at the authorized Philippine service center/s for a period of ten (10) years after the warranty period. / ii. Guarantees availability of competent in-house technical specialists in handling and providing technical support as well as maintenance of the equipment. / iii. Will conduct training for proper orientation and maintenance to end-users of the equipment upon delivery. / iv. It will provide replacement/back-up unit while the delivered unit is being repaired during the warranty period / V. With duly notarized certificate from Principal Manufacturer - Barkey GmbH & Co. KG / <i>Certifies that:</i> i. That the Principal Manufacturer shall honor all the terms and conditions stated in the bidding documents per IRR of RA 9184 and corresponding contract for the project including in the event that a change of dealership will occur during the duration of the contract up to the warranty and preventive maintenance period; / ii. The expected service life of the equipment under normal use is five (5) years. / iii. Guarantee availability of spare parts, accessories and consumables at least for the next ten (10) years from testing, commissioning, acceptance and delivery; / iv. That it has competence in handling and providing technical support as well as maintenance of the equipment; /		

-page 2 of 3-

Funding Code _____

FUNDS AVAILABLE: _____

LOURDES B. DELOS REYES, CPA
 Chief Accountant

APPROVED: _____

SONIA B. GONZALEZ, MD, MS, HSM, MPM
 Executive Director

Attachments:
 P.R. No. PathoBB-2022-09 /
 Abstract of Canvass/Bids /
 Canvass Sheet/Tender of Bids
 Notarized Certification of Exclusive Distributor
 Justification
 Others NOA-2022-197 /
NTP-PROC-2023-006
BAC Reso No. R2022-12-659 /

TOTAL AMOUNT P _____

CERTIFICATION
 This is to certify that I received today the Original 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) - Supplier (to be attached in the claim voucher with other supporting documents) Pink - Supply and Property
 Yellow (Duplicate) - Procurement



Republic of the Philippines
PHILIPPINE CHILDREN'S MEDICAL CENTER
 Quezon Ave., Quezon City
 Tel. No.: 588-9900 loc. 224, 226, 390

PURCHASE ORDER
 FOR SUPPLIES OR EQUIPMENT

74348

P.R. NO. PathoBB-2022-09 / Dated: June 20, 2022 /

MODE OF PROCUREMENT

PUBLIC BIDDING /

CS No. _____ AC No. _____

DATE OF P.O. Jan. 6, 2023 /

TO: Supplier/Dealer Contractor **OMNIBUS BIO-MEDICAL SYSTEMS INC.** /

Address: 1052 Sitio 2, Bahay Pare, Candaba, Pampanga

Tel. No.: 8961-7033 Email Add: sales@omnibus.ph / lfernandez@omnibus.ph

Department/Office/Division/Section/Unit where delivery

Delivery period: 7 working days Other Terms: _____

Is to be made:

Bidder's Bond Posted: Cash GSIS Policy Bank Guaranteed

Location: Materials Management Division

Cashier's / Manager's / Cert Check No. 158-13002200048

Special Instructions: Ground Floor, PCMC Bldg.

PCMC O.R. No. _____ Amount P 84,950.00

Item No.	QTY.	UNIT	ARTICLES	UNIT COST	TOTAL COST
	1	unit	<p>Supply and Delivery of Plasma Thawer Brand/Model: Barkey Plasmatherm</p> <p>v. Consumer guidelines regarding disposal: / > This product may not be disposed of with normal household waste. This product must be taken to a specialist disposal company or returned to the manufacturer for disposal. /</p> <p>V. DELIVERY PERIOD: Forty-Five (45) calendar days upon receipt of Purchase Order /</p> <p>*** Nothing Follows *** Note: For Pathology Division</p>		
<p>Penalty Clause for Delayed or Unsatisfactory Deliveries:</p> <p>1. One-tenth (1/10) of one percent (1%) of the cost of unperformed portion for every day of delay. Once the cumulative amount of liquidated damages reaches 10% of the amount of contract, the Procuring Entity may rescind or terminate the contract, without prejudice to other courses of action and remedies available under the circumstances.</p> <p>2. Excess in price, if procured from third parties, through alternative mode of procurement; and</p> <p>3. In case of bidding, forfeiture of performance security equal to 5% of the undelivered item/s.</p>					
- page 3 of 3					

Funding Code 1-06-05-110 / (2021 ED) mgd 1/11/23
7609M

TOTAL AMOUNT P 697,000.00 /

FUNDS AVAILABLE: ₱ 697,000.00

Attachments:

- P.R. No. PathoBB-2022-09 /
- Abstract of Canvass/Bids
- Canvass Sheet/Tender of Bids
- Notarized Certification of Exclusive Distributor
- Justification
- Others NOA-2022-197 /
- NTP-PROC-2023-006 /
- BAC Reso No. R2022-12-659 /

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

Loures B. DeLos Reyes, CPA
 Chief Accountant

APPROVED:

Sonia B. Gonzalez, MD, MSChSM, MPM
 Executive Director

(Signature over printed name)

Date: _____

Distribution : White (Original) - Supplier (to be attached in the claim voucher with other supporting documents) Pink - Supply and Property
 Yellow (Duplicate) - Procurement



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 TO PROCEED

NTP-PROC-2023-006


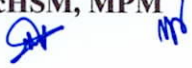
OMNIBUS BIO-MEDICAL SYSTEMS INC.

1052 Sitio 2, Bahay Pare,
Candaba, Pampanga
Tel. No.: 8961-7033
Email Add: sales@omnibus.ph / lfernandez@omnibus.ph

Sir/Madam:

This is to inform you that Purchase Order No. **74348** as a result of Public Bidding for the purchase of **Supply and Delivery of one (1) unit Plasma Thawer (Brand: Barkey Plasmatherm)** has been approved.

You may now proceed with the delivery of the items listed in the attached Purchase Order within **Forty-Five (45) calendar days upon receipt of Purchase Order**


SONIA B. GONZALEZ, MD, MScHSM, MPM
Executive Director 

CONFORME:

Received Original

Signature Over Printed Name

Authorized Representative

Date: _____