



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 **74407** **N^o 74407**
 FOR SUPPLIES OR EQUIPMENT
 P. R. NO. **PATHOBB-2023-04** / Dated: **11/18/22** /
 MODE OF PROCUREMENT
PUBLIC BIDDING (Multi Year Project) /
 CS No. _____ AC No. _____
 DATE OF P.O. **January 16, 2023**

TO: Supplier/Dealer Contractor **LIFELINE DIAGNOSTICS SUPPLIES, INC.** /
 Address: **1225 Quezon Avenue., Brgy. Sta. Crus, Quezon City / Tel No.: 8376-5917 / Fax No.: 8372-1675/98**
 Email: **info@lifelinediag.com**

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: **PS to follow**
 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	3	kit	<p>One (1) Lot Supply and Delivery of supplies/consumables under Machine Placement Agreement for three (3) years for Hemoglobin Screening for Blood Donors and free use of Three (3) units Hemoglobin Screening, Non-invasive, portable machines for blood donors (Orsense NBM 200) /</p> <p>Non Invasive Hemoglobin Testing, 5000T/Sensor Probe / 5000 test / kit, Orsense/ 5000T/sensor probe /15000</p> <p>* With the same Terms and Conditions per attached Memorandum of Agreement Conformance to the attached Terms of Reference</p> <p>Note: For the use of Pathology Division-Bloodbank (CY-2023) (Multi Year Project: 2nd Year) All deliveries shall have at least One (1) year expiration period.</p>	289,000.00	867,000.00

(Eight Hundred Sixty Seven 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 **5-02-03-080** / **md 1/15/23**

TOTAL AMOUNT P **867,000.00**

FUNDS AVAILABLE: **₱ 867,000.00**
LOURDES B. DELOS REYES, CPA
 Chief Accountant

- Attachments:
- P.R. No. **PATHOBB-2023-04** /
 - Abstract of Canvass/Bids
 - Canvass Sheet/Tender of Bids
 - Notarized Certification of Exclusive Distributor
 - Justification
 - Others
 - BAC Reso No. **2023-01-046** /
 - NOA-2022-006** /
 - NTP-PROC-2023-057** /

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

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

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

NOTICE TO PROCEED
NTP-PROC-2023-057

January 16, 2023

LIFELINE DIAGNOSTICS SUPPLIES, INC.

1225 Quezon Avenue., Brgy. Sta, Cruz,

Quezon City

Tel No.: 8376-5917 / Fax No.: 8372-1675/98

Email: info@lifelinediag.com

Sir/Madam:

This is to inform you that Purchase Order No. 74407 for the 2nd Year of Multi-Year Project for the procurement of **One (1) Lot Supply and Delivery of Reagents/Consumables under Machine Placement Agreement for three (3) years for Hemoglobin Screening for Blood Donors** 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: _____