

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	74418	Ma	74418	3			
FOR SUPPLIES OR EC	-		/11/10/22	,			
MODE OF PROCUREM PUBLIC BIDDING (Mu	MENT						
CS No.	AC No.						
DATE OF P.O. Janu	ary 16, 20	023 -					

TO: Sup		ealer	Contractor 49 Examin		DISTRIBUTOR angle, Quezon C	RS, INC. / ity / Tel. No.: 8928-4293 / Fax	x No.: 8925-0	0500	philye PC	
			1375	Email Add: 1	tarayao.jemimal	n25@gmail.com		HAGO III	11 /1	
Department/Office/Division/Section/Unit where delivery Is to be made: Materials Management Division Location: Ground Floor, PCMC Bldg. Special Instructions					ere delivery ision	Delivery period: 7 working days Performance Security Posted: Cash / Cashier's / Manager's Check No. PCMC O.R. No. Amount P				
Item No.	QTY		UNIT	770401	rollera gian et	ARTICLES	Top of Land	UNIT COST	TOTAL COST	
		ye	ars for Im	munoanalyzer	for Procalciton	nts/ consumables under Re in Determination and free that can analyze samples u	use of One	(1) unit BRAHM	S KRYPTOR	
1 2 3 4 5 6 7 8 9	70 13 18 6 5 5 6 5 2 2	********	kit	BRAHMS PCT Sensitive K-CAL, 6 test/pack, Thermofisher Brahms BRAHMS PCT Sensitive K-QC, 10 test/pack, Thermofisher Brahms BRAHMS Kryptor Buffer, 5 bot/box, Thermofisher Brahms BRAHMS K-Compact Solution 1, 4 bot/box, Thermofisher Brahms BRAHMS K-Compact Solution 2, 4 bot/box, Thermofisher Brahms BRAHMS K-Compact Solution 3, 4 bot/box, Thermofisher Brahms			Brahms Brahms Brahms Brahms Brahms Brahms Brahms Brahms Brahms	36,111.12 5,751.42 11,503.27 7,247.06 4,141.18 4,601.31 6,901.96 4,601.31 12,385.19 31,288.88	2,527,778.40 74,768.46 207,058.86 43,482.36 20,705.90 23,006.55 41,411.76 23,006.55 24,770.38 62,577.76 3,048,566.98	
1. One-te Once the the Procu action an 2. Excess	enth (1/10) cumulative uring Entity nd remedie in price, if	of one amou may re s availa procur	ed or Unsatis percent (1%) nt of liquidate escind or termi ble under the red from third	Note: Fo Il deliveries sh sfactory Deliveries of the cost of unper d damages reaches inate the contract, so circumstances. parties, through a	r the use of Par (Multi Year P all have at lease: formed portion for 10% of the amount without prejudice to	of the contract, o other courses of procurement; and	Additional 1. Stagge 2. Deliver Delivery 3. Delivery in	Thousand Five Six Peso instructions & condi red Delivery/Pay ry will take effect Confimation of Constitution of Constitution of Constitution	tions: /ment t upon receipt c uantity/Date s upon receipt of	
3. In case	of bidding	, forfei	ture of perfor	mance security equ	al to 5% of the unde	elivered item/s.	in this PO fo where the av	the right to reject or c r justifiable and reason ward will not benefit th d conditions specified o	nable ground e Government	
	g Code	~ -	02-03-0	180 ml 1	X/3	r sin rosastina, isbi	TOTAL	AMOUNT P	3,048,566.98	
FUND LOUR OI APPRO	DES B. I. Chicology OVED: Ab/te B. GON	LAI	REYES, CI	048, 566.98 24/23 CHSM, MPM	Attachments P.R. No. Canvass Notarize Exclusiv Justificat Others A	of Canvass/Bids Sheet/Tender of Bids d Certification of e Distributor	This today Order bound of the applic	certification is to certify to the copy of	rion hat I received this Purchase he Company and stipulation d other laws	

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-2023-068

January 16, 2023

ZAFIRE DISTRIBUTORS, INC.

49 Examiner St., West Triangle,

Quezon City

Tel No.: 8928-4293 / Fax No.: 8925-0500 Email: tarayao.jemimah25@gmail.com

Sir/Madam:

This is to inform you that Purchase Order No. 74418 for the 2nd Year of Multi-Year Project for the procurement of One (1) Lot Supply and Delivery of supplies/consumables under Reagent Tie-Up Agreement for three (3) years for Immunoanalyzer for Procalcitonin Determination 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:

Management System ISO 9001:2015 ISO 14001:2015 WWW.tuv.com