

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

FUNCHASE ONDER	* "			
FOR SUPPLIES OR EQUIPME	NT			
P. R. NO. MISD-2023-02-06	_ Dated: _	02/06/2023		
MODE OF PROCUREMENT				
NP-53.9 /	Company of the Company	02/21/2023		
CS No.	_AC No.	2023-126 -		

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TO: Su Address	pplier/Dealer s:		UBIX CO	RPORATION City	/	og attent.				
Department/Office/Division/Section/Unit where delivery Is to be made: Supply & Property Section Location: Ground Floor, PCMC Bldg. Special Instructions				Performan	Delivery period: 7 working days Other Terms: Performance Security Posted: Surety Bond No. Cash / Cashier's / Manager's Check No. PCMC O.R. No. Amount P					
Item No. QTY. UNIT A				ARTICLES	ARTICLES UNIT COST TOTAL CO					
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may rescind	d or terminate the co	ontract, without pre from third parties, ti	udice to other cour							
		02-99-05				ne ruray - 1 tr	TOTAL	AMOUNT P	507,600.00	
OIC- APPRO	DES B. DEL Chief Acco OVED:	untant Ly ALEZ. M.D,	CPA ³ /4	☐ Canvass ☐ Notarize Exclusiv ☐ Justificat ☐ Others	of Canvass/I Sheet/Tende ed Certification we Distributor tion	r of Bids on of	today of Order, bound of the applica	and held the by the terms a contract and	TION nat I received this Purchase he Company nd stipulation d other laws	
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White (Original) - Attachment to payment Yellow (Duplicate) - Procurement Distribution:

Pink - Supply and Property