



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 75000 N<sup>o</sup> 75000**  
 FOR SUPPLIES OR EQUIPMENT  
 P. R. NO. PHAR-2023-001-RF Dated: 10/11/22  
 MODE OF PROCUREMENT  
**PUBLIC BIDDING**  
 CS No. \_\_\_\_\_ AC No. \_\_\_\_\_  
 DATE OF P.O. May 16, 2023

TO: Supplier/Dealer Contractor **GENZEN PHARMACEUTICAL TRADING** ✓  
 Address: 890 Purok 4 Longos, Calumpit, Bulacan

Department/Office/Division/Section/Unit where delivery Is to be made: Materials Management Division  
 Location: Ground Floor, PCMC Bldg.  
 Delivery period: 7 working days Other Terms: \_\_\_\_\_  
 Performance Security Posted:  Surety Bond No. \_\_\_\_\_  
 Cash / Cashier's / Manager's Check No. \_\_\_\_\_  
 PCMC O.R. No. 670067 Amount P 23,725.00

Item No.	QTY.	UNIT	ARTICLES	UNIT COST	TOTAL COST
1	10,000	ampul/ vl	Gentamicin Sulf 40mg/mL, 2mL (IM,IV) "GENTACARE" ✓ USP Type I Clear Glass Ampoule x 2mL (Box of 10's) ✓ [Grand Pharmaceutical (China) Co., Ltd. No.5 Gutian Road Wuhan, China] [China] ✓	12.00	120,000.00
2	65,000	cap/ tab	Multivitamins tab/cap blister/foil pack "MULTICAPS" ✓ Blister Pack x 10's (Box of 100 Capsules) ✓ (Deep Red PVC & Pre-Printed Aluminum Foil) ✓ [St. Barachiel The Archangel Food Industries Inc., Blk.2, Lot 7-A] [Philippines]	2.00	130,000.00
3	7,000	amp	Paracetamol 150mg/mL, 2mL Soln for injection (IM/IV) ✓ "AMCETAM", Type II Amber Glass Ampoule x 2mL (Box of 10's) ✓ [CSPC Ouyi Pharmaceutical Co., Ltd, No. 276 West Zhongshan Road, Shijiazhuang, Hebei Province, P.R. China] ✓	8.50	59,500.00
					<b>309,500.00</b> ✓
					vvvvvvvvvv
***Nothing Follows***					(Three Hundred Nine Thousand Five Hundred Pesos only)
Conforme to Terms of Reference For the use of Pharmacy Division (CY-2023) To be sourced from Revolving Fund (RF) All deliveries shall have at least One (1) year expiration period.					

**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 5-02-63-070 ✓ mgd 5/19/23  
**TOTAL AMOUNT P** 309,500.00 ✓

FUNDS AVAILABLE: ₱ 309,500.00  
LEA M. VILLALOBOS, CPA, MBA  
 Chief Accountant

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

Attachments:  
 P.R. No. PHAR 2023-001-RF ✓  
 Abstract of Canvass/Bids ✓  
 Canvass Sheet/Tender of Bids  
 Notarized Certification of Exclusive Distributor  
 Justification  
 Others BAC Reso No.2023-05-269 ✓  
 NOA-2023-118-001 ✓  
 NTP-PROC-2023-238 ✓

**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





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**PURCHASE ORDER 75001 N<sup>o</sup> 75001**  
 FOR SUPPLIES OR EQUIPMENT  
 P. R. NO. PHAR-2023-002-RF Dated: 10/11/22 ✓  
 MODE OF PROCUREMENT  
**PUBLIC BIDDING** ✓  
 CS No. \_\_\_\_\_ AC No. \_\_\_\_\_  
 DATE OF P.O. May 16, 2023 ✓

TO: Supplier/Dealer Contractor **GENZEN PHARMACEUTICAL TRADING** ✓  
 Address: 890 Purok 4 Longos, Calumpit, Bulacan  
 Email: genzenpharmatrading@gmail.com/ Tel No.

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. \_\_\_\_\_  
 Cash / Cashier's / Manager's Check No. \_\_\_\_\_  
 PCMC O.R. No. 630067 Amount P 23,725.00

Item No.	QTY.	UNIT	ARTICLES	UNIT COST	TOTAL COST
1	11,000 ✓	amp ✓	Furosemide amp 10mg/mL, 2mL (IM,IV) "FUROXIDE" ✓ USP Type I Amber Colored Glass Ampoule x 2mL (Box of 10's) ✓ [Hormann Pharmaceutical Laboratories (Pvt.) Ltd. 16 Km. Multan Road, Lahore City, Pakistan] ✓  ***Nothing Follows***  Conforms to Terms of Reference For the use of Pharmacy Division (CY-2023) To be sourced from Revolving Fund (RF) All deliveries shall have at least One (1) year expiration period.  <b>VAT EXEMPT</b>	15.00 ✓	165,000.00 ✓  165,000.00 ✓ vvvvvvvvvv ✓ (One Hundred Sixty Five 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, for 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 5-02-03-070 mgd 5/19/23 **TOTAL AMOUNT P 165,000.00** ✓

FUNDS AVAILABLE: ₱ 165,000.00  
5/19  
**LEA M. VILLALOBOS, CPA, MBA**  
 Chief Accountant

APPROVED:  
5/19/23  
**SONIA B. GONZALEZ, MD, MSChSM, MPM**  
 Executive Director

- Attachments:  
 P.R. No. PHAR 2023-002-RF ✓  
 Abstract of Canvass/Bids ✓  
 Canvass Sheet/Tender of Bids  
 Notarized Certification of Exclusive Distributor  
 Justification  
 Others  
 BAC Reso No.2023-05-269 ✓  
 NOA-2023-118-001 ✓  
 NTP-PROC-2023-238 ✓

**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  
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Republic of the Philippines  
DEPARTMENT OF HEALTH  
**PHILIPPINE CHILDREN'S MEDICAL CENTER**

Quezon Avenue, Quezon City 1100  
website: [www.pcmc.gov.ph](http://www.pcmc.gov.ph) email: [officeofthedirector@pcmc.gov.ph](mailto:officeofthedirector@pcmc.gov.ph)  
Trunk Line: 8588-9900 to 20 Direct Line: 8924-6601

**NOTICE TO PROCEED**  
NTP-PROC-2023-238

May 16, 2023



**GENZEN PHARMACEUTICAL TRADING**

890 Purok 4, Longos,  
Calumpit, Bulacan  
Tel. No. (044)-8128355

Sir/Madam:

This is to inform you that Purchase Order Nos. 75000/75001 as a result of Public Bidding for the procurement of Various Pharmaceutical Supplies have 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: \_\_\_\_\_