



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
Trunkline: 588-9900 DirectLine: 924-0836 Fax No: 924-0840

NOTICE OF AWARD
NOA-2020-057

RG MEDITRON, INC.

LFG Building, 82 Panay Avenue,
Quezon City
Tel. No.: 372-3846 to 55 loc. 121
Fax No.: 372-3256
E-mail Add: pulmo@rg-meditron.com.ph

Dear Sir / Madam:

This is to inform you that based on the result of the conducted Public Bidding for the project stated below under Invitation to Bid No. IB-2019-136 as per BAC Resolution No. R2020-01-089, your proposal was found to be responsive.

QTY	UNIT	ITEM DESCRIPTION	TOTAL COST (Php)
1	unit	Supply and Delivery of Pressure/Volume Ventilator (5kg and above) Brand/Model: VYAIRE (Carefusion)/ VELA Ventilator (see Annex "A" for detailed specifications)	Php1,200,000.00

You are hereby required to provide on or before 04 FEB 2020 the Performance Security in either of the following form:

FORM OF PERFORMANCE SECURITY	AMOUNT OF PERFORMANCE SECURITY (Equal to Percentage of the Total Contract Price)
a) Cash or cashier's/ manager's check issued by a Universal or Commercial Bank	Five percent (5%) Php60,000.00
b.) Bank draft/guarantee or irrevocable letter of credit issued by a Universal or Commercial Bank: Provided, however, that it shall be confirmed or authenticated by a Universal or Commercial Bank, if issued by a foreign bank	
c) Surety bond callable upon demand issued by a surety or insurance company duly certified by the Insurance Commission as authorized to issue such security.	Thirty percent (30%) Php360,000.00



**NOTICE OF AWARD
NOA-2020-057
RG MEDITRON, INC.**

Failure to provide the Performance Security shall constitute sufficient ground for cancellation of the award and imposition of penalties/ forfeiture corresponding to the Bid Security posted.

Very truly yours,

JULIUS A. LECCIONES, MD, PhD, DPA, CESO III
Executive Director



Conforme:

This is to certify that the company has authorized me to accept this award, sign all related documents and hold the company bound by rules and laws applicable thereto.

Authorized Signatory (Signature over printed name)

Designation

Date