

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	No	76157	
FOR SUPPLI	ES OR EQUIPME	NT	7	615
P. R. NO. PHA	AR-2024-001-GF	Dated:	10/09/2023	0.00
MODE OF PR	ROCUREMENT JBLIC BIDDING			
CS No.		AC No.		
DATE OF PO	JANUARY 10,	2024		

Distrib	Executive I	Director Thite (Origin	al) - Attachment to pa			:	
APPRO	Chief Acco	ountant	☐ Notarized		bound of the applica	by the terms a contract and	tinted name)
FUND	S AVAILA	BLE:	Attachments ☐ P.R. No. ☐ Abstract	of Canvass/Bids			TION hat I received this Purchase
Fundin	g Code				TOTAL	AMOUNT P	
ek e Ti.	Andrew va						-
e			***Page	1 of 2***			3,301,200.00 vvvvvvvvv
9	550	bt		0U/mL, 30mL "Afungina I oral suspension, 30ml, : es Limited]		160.00	88,000.00
8	5,000	bt	with taurine, lysine, ch food supplement syrup	OmL " TLC Vita" Vitamins Norella growth factor plu In, 120ml [Lloyd Laborato	s zinc ries Inc.]	50.00	250,000.00
7	300	vl	0.5 mmol/ml (equivale for injection (IV), 10ml	yclolux" Gadoteric Acid ent to 279.32mg/ml) solu , 1's [Sanochemia Pharm	ution nazeutika AG]	1,998.00	599,400.00
6	15,000	tab		m-coated tablet, 100's [A		105.97	1,589,550.00
5	2,300	cap	Clindamycin HCl cap 30 Clindamycin (as hydroc [Hizon Laboratories, In	Omg blister/foil pack <i>"Cl</i> chloride) 300mg cap, 100 oc.]	indal"	12.50	28,750.00
4	700	bt	Detirizine Dihydrochloric "Rhinitrin" Cetirizine	Oml, 1's [Swiss Parenterd de soln bt 5mg/5mL, 30n (as hydrochloride) 5mg/5 ele Laboratories Phils., In	nL 5 <i>ml</i>	50.00	35,000.00
3	4,000	vl	[Brawn Laboratories L Cefuroxime Sod vl 750n Cefuroxime (as Sodiun	ng (IM,IV) "Infekor"		50.00	200,000.00
2	1,600	vl		l 1g (IM,IV) "Onetazid" or for injection (IM/IV), 1	's	155.00	248,000.00
1	17,500	tab	Baclofen 10mg tablet,		2 - Frank	15.00	262,500.00
Item No.	QTY.	UNIT		ARTICLES		UNIT COST	TOTAL COST
Is to be	made:	Supply & Prop Ground Floor	tion/Unit where delivery perty Section PCMC Bldg.	Delivery period: 7 wo Performance Security Cash / Cashier's / N PCMC O.R. No.	Posted:		No. 6(13) 60610
	7	el. No.: 091	78546532			1	ig City
Address	oplier/Dealer	Jnit 1408 4th	OXFORD DISTRIB Teloor East Tower, PSEC, E		enter, Brov. S	an Antonio. Pas	ig City



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

TO: Supplier/Dealer Contractor **OXFORD DISTRIBUTIONS, INC.**

PUR	CHASE	OR	DEI	R			
COD	CLIDDI	TEC	Ω D	EOI	IIDM	END	г

FOR SUPPLIES OR EQUIPMENT P. R. NO. PHAR-2024-002-GF

Dated: 10/09/2023

76157

MODE OF PROCUREMENT PUBLIC BIDDING

AC No. DATE OF P.O. JANUARY 10, 2024

Cash / Cashier's / Manager's Check No.	Address			Floor East Tower, PSEC, Exc	change Road, Ortigas Cer	iter, Brgy. S	an Antonio, Pasi	g City	
Rem No. QTY. UNIT ARTICLES UNIT COST TOTAL COST	Department/Office/Division/Section/Unit where delivery Is to be made:Supply & Property Section				Performance Security Posted: Surety Bond No. 6(B) 1600				
BALANCE FORWARDED Permethrin 5% lotion 60ml. "Lindell" Permethrin 5% lotion 60ml. "Lindell" Permethrin 50mg/ml (5%) lotion, 60ml [Swiss Pharma Research Loboratories, Inc.] ***Page 2 of 2*** ***Nothing Follows*** Conforme to the attached Terms of Reference For the use of Pharmacy Division (CY-2024) To be sourced from COB All deliveries shall have at least One (1) year expiration period. Additional instructions & conditions: 1. Staggered Delivery/Payment 2. Delivery Within 7 working dais you pon receipt of Delivery Confimation of Quantity/Date 3. Delivery is within 7 working dais you pon receipt of Delivery Confimation of Quantity/Date 3. Delivery is within 7 working dais you pon receipt of Delivery Confimation of Quantity/Date 3. Delivery is within 7 working dais you pon receipt of Delivery Confimation of Quantity/Date 3. Delivery is within 7 working dais you pon receipt of Delivery Confimation of Quantity/Date 3. Delivery is within 7 working dais you pon receipt of Delivery Confimation of Quantity/Date 3. Delivery is within 7 working dais you pon receipt of Delivery Confimation of Quantity/Date 3. Delivery is within 7 working dais you pon receipt of Delivery Confimation of Quantity/Date 3. Delivery is within 7 working dais you pon receipt of Delivery Confimation of Quantity/Date 3. Delivery is within 7 working dais you pon receipt of Delivery Confimation of Quantity/Date 3. Delivery is within 7 working dais you pon receipt of Delivery Confimation of Quantity/Date 3. Delivery is within 7 working dais you pon receipt of Delivery Confimation of Quantity/Date 3. Delivery is within 7 working dais you pon receipt of Delivery Confimation of Quantity/Date 3. Delivery is within 7 working dais you pon receipt of Delivery Confimation of Quantity/Date 3. Delivery is within 7 working dais you pon receipt of Delivery Confimation of Quantity/Date 3. Delivery is within 7 working dais you pon receipt of Delivery Confimation of Quantity/Date 3. Delivery is within 7 working dais you pon receipt of Delivery Confimation of Qu	Location: Ground Floor, PCMC Bldg.			Cash / Cashier's / Manager's Check No.			, 735.00		
Penalty Clause for Delayed or Unsatisfactory Deliverles: Conforme to the attached Terms of Reference For the use of Pharmacy Division (CY-2024) To be sourced from COB All deliveries shall have at least One (1) year expiration period. All deliveries shall have at least One (1) year expiration period. Additional instructions & conditions: 1. Staggered Delivery/Payment 2. Delivery (Division of Quantity/Date 3. Delivery (Signature of performine security equal to 5% of the undelivered item/s. Funding Code C-02-09-09-0 Abstactory of the undelivered item/s. Approve Confirmation of Quantity/Date 3. Delivery (onfirmation of Quantity/Date 3. Delivery (onfirmation of Quantity/Date 3. Delivery (onfirmation of Quantity) and the undelivered item/s. The produced of the undelivered item/s. Funding Code C-02-09-09-09-09-09-09-09-09-09-09-09-09-09-	Item No.	QTY.	UNIT	A	ARTICLES		UNIT COST	TOTAL COST	
1. Staggered Delivery/Payment 2. Delivery will take effect upon receipt of Delivery confirmation of Quantity/Date action and remedies available under the circumstances. 2. Excess in price, if procurred from third parties, through alternative mode of procurement; and b. In case of bidding, forfeiture of performance security equal to 5% of the undelivered item/s. Funding Code (-02-03-07)	10	50		Permethrin 5% lotion 60r Permethrin 50mg/ml (5) [Swiss Pharma Research ***Page 2 ***Nothing Conforme to the attach For the use of Pharma To be source	%) lotion, 60ml a Laboratories, Inc.] ? of 2*** Follows*** ed Terms of Reference cy Division (CY-2024) d from COB	period.	(Three Million Th Eleven Thousand	Two Hundred	
Funding Code	L. One-tent Once the cu the Procuri action and 2. Excess in	h (1/10) of one imulative amou ng Entity may n remedies availa price, if procur	percent (1%) of nt of liquidated escind or terminable under the or red from third p	the cost of unperformed portion f damages reaches 10% of the amo ate the contract, without prejudio dircumstances. arties, through alternative mode	unt of the contract, e to other courses of of procurement; and	1. Staggere 2. Delivery Delivery Co 3. Delivery is Delivery Conf 4.PCMC has a in this PO for where the aw	ed Delivery/Paym will take effect to onfimation of Qua within 7 working day irmation the right to reject or or r justifiable and reaso and will not benefit to	report receipt of antity/Date s upon receipt of ancel any items mable ground the Government	
APPROVED: Exclusive Distributor Justification Others BAC RESO # R2024-00-010/ NOA-2024-001-015 NTP-PROC-2024-058 Of the contract and other law applicable. (Signature over printed name)	Funding FUNDS	CodeC- AVAILAB	LE: 4 3,311 118 S, CPA, MBA	Attachments: P.R. No. Pl Abstract of Canvass Si	f Canvass/Bids heet/Tender of Bids	TOTAL This today Order	AMOUNT P CERTIFICAT is to certify th the copy of t , and held th	3,311,250.00 ION at I received his Purchase ne Company	
Distribution: White (Original) - Attachment to payment	SONIA I	B. GONZALEZ Executive D		Exclusive Justificatio Others BA NO NO NO NO NO NO NO NO NO N	Distributor on IC RESO # R2024-00-010/ OA-2024-001-015 P-PROC-2024-058	of the application (S	e contract and able.	inted name)	



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-2024-058

January 10, 2024

OXFORD DISTRIBUTIONS, INC.

Unit 1408 East Tower, PSEC Evenange Road

	Ortigas Center, Brgy. San Atonio, Pasig City Tel. No.: 09178546532
	Tel. No.: 09176346332
	Sir/Madam:
	This is to inform you that Purchase Order No. <u>76157/76158</u> as a result of <u>Public Bidding</u> for the Procurement of <u>Various Pharmaceutical Supplies for CY 2024</u> has been approved.
	You may now proceed with the delivery of items listed in the attached Purchase Order within <u>seven (7) working days</u> from receipt of this notice and/or Delivery Order Slip for Staggered Delivery.
'Y	SONIA B. GONZALEZ, MD, MScHSM, MPM Executive Director
	CONFORME: Received Original
	Signature Over Printed Name
	Authorized Representative Date: