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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

NO PURCHASE ORDER FOR SUPPLIES OR EQUIPMENT Dated: 10/09/2023

76164

AC No.

76164

P. R. NO. PHAR-2024-001-GF MODE OF PROCUREMENT

PUBLIC BIDDING

CS No.

JANUARY 10, 2024 DATE OF P.O.

SANDOVAL DISRIBUTORS, INC. TO: Supplier/Dealer Contractor San Pedro West Rosales, Pangasinan Address: Tel. No.: (02)7910-0000 / (02)8687-3563 Department/Office/Division/Section/Unit where delivery Delivery period: 7 working days Other Terms: Performance Security Posted: Surety Bond No. Is to be made: Supply & Property Section Cash / Cashier's / Manager's Check No. 300-024087 Location: Ground Floor, PCMC Bldg. Amount P 115, 724.80 PCMC O.R. No. 24624087 Special Instructions UNIT COST TOTAL COST UNIT ARTICLES Item No. QTY. 1 120 v Amphotericin B 50mg lyophilized powder vl (IV) 1,000.00 120,000.00 "AMPHOTRET" Amphotret 50 mg, USP Type I Glass Vial with rubber stopper and green flip off seal (Box of 1's) [Bharat Serums and Vaccines Ltd.] 200 vl Amphotericin B Lipid Complex 50mg (IV Infusion) 10,972.48 2,194,496.00 2 "AMPHOLIP" Ampholip 50 mg, USP Type I Glass Vial 2,314,496.00 with rubber stopper and green flip off seal (Box of 1's) VVVVVVVVV [Bharat Serums and Vaccines Ltd.] Two Million Three Hundred Fourteen Thousand Four ***Nothing Follows*** Hundred Ninety Six Pesos Only) 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: 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. 1. Staggered Delivery/Payment 2. Delivery will take effect upon receipt of 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 Delivery Confimation of Quantity/Date action and remedies available under the circumstances. 3. Delivery is within 7 working days upon receipt of 2. Excess in price, if procurred from third parties, through alternative mode of procurement; and **Delivery Confirmation** 3. In case of bidding, forfeiture of performance security equal to 5% of the undelivered item/s. 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 5-02-07-070 mgo 1/18/24		TOTAL AMOUNT P 2,314,496.00
FUNDS AVAILABLE: 7 2,314,496.00	Attachments: P.R. No. PHAR-2024-001-GF	CERTIFICATION This is to certify that I received
LEA M. VILLALOBOS, CPA, MBA Chief Accountant	 Abstract of Canvass/Bids Canvass Sheet/Tender of Bids Notarized Certification of 	today the copy of this Purchase Order, and held the Company bound by the terms and stipulation
APPROVED: //b//huguley SONIA B. GONZALEZ, MD, MSCHSM, MPM / Executive Director	Exclusive Distributor Justification A Others BAC RESO # R2024-00-010/ NOA-2024-001-020 NTP-PROC-2024-063	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



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

Quezon Avenue, Quezon City 1100 website: <u>www.pcmc.gov.ph</u> email: <u>officeofthedirector@pcmc.gov.ph</u> Trunk Line: 8588-9900 to 20 Direct Line: 8924-6601

NOTICE TO PROCEED NTP-PROC-2024-063

January 10, 2024

SANDOVAL DISRIBUTORS, INC. San Pedro West Rosales, Pangasinan Tel. No.: (02)7910-0000 / (02)8687-3563

Sir/Madam:

This is to inform you that Purchase Order No. <u>76164</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.

SONIA B. GONZALEZ, MD, MScHSM, MPM Executive Director

CONFORME: Received Original

Signature Over Printed Name Authorized Representative Date: _____



