



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 76191**
 FOR SUPPLIES OR EQUIPMENT 76191
 P. R. NO. Nephro-2024-01 Dated: 10/25/2023
 MODE OF PROCUREMENT
PB
 CS No. NOA-2024-008-009 AC No. R2024-019
 DATE OF P.O. January 12, 2023

TO: Supplier/Dealer Contractor HELANDE KIDNEY CARE, INC.
 Address: 3rd Flr. Jafer Bldg., No. 118 west Ave., Philam 1, Quezon City, Meytro Manila Tel: 7120-7933

Department/Office/Division/Section/Unit where delivery Is to be made: _____
 Location: Supply & Property Section
 Special Instructions: Ground Floor, PCMC Bldg.
 Delivery period: 7 working days Other Terms: _____
 Performance Security Posted: Surety Bond No. G(13) 154964
 Cash / Cashier's / Manager's Check No. _____
 PCMC O.R. No. _____ Amount P 525,168.00

Item No.	QTY.	UNIT	ARTICLES	UNIT COST	TOTAL COST
1	12	pc	Hemoperfusion Cartridge for Sepsis Brand: HA330 Packaging: Box of 1's Specification: Adsorbent Volume (mL) - 330±3 Blood Volume (mL) - 185±5 Adsorbent Material - Secondary Crosslinked Styrene Divinylbenzene Copolymers Housing Material - Polycarbonate Sterilization Method - Irradiation Sterilization Unit Package - 290mm(L) x 105mm(W) x 105mm(H) Jafron Biomedical Co., Ltd	35,380.00	424,560.00
2	30	pc	Pediatric Disposable Hemoperfusion for Sepsis Brand: HA60 Packaging: Box of 1's Specification: Adsorbent Volume (mL) - 60 Blood Volume (mL) - 65±20 Adsorbent Material - Double Crosslinked Styrene-divinylbenzene Copolymers Housing Material - Polycarbonate Sterilization Method - Irradiation Sterilization Jafron Biomedical Co., Ltd ***Nothing Follows*** Note: For the use of Nephrology and Hemodialysis/Peritoneal Dialysis All deliveries shall have at least One (1) year expiration period.	44,200.00	1,326,000.00 <u>1,750,560.00</u> wwwwww (One million seven hundred fifty thousand five hundred sixty pesos only).
					1,750,560.00

Funding Code _____

FUNDS AVAILABLE: MBA

Chief Accountant

x Nephro-2024-01

x Attachments:

- P.R. No. _____
- Abstract of Canvass/Bids
- Canvass Sheet/Tender of Bids
- Notarized Certification of Exclusive Distributor
- Justification
- Others _____

APPROVED:
SONIA B. GONZALEZ, M.D., MSChSM, MPM

Executive Director

TOTAL AMOUNT P

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
FOR SUPPLIES OR EQUIPMENT
 P. R. NO. Nephro-2024-01 Dated: 10/25/2023
 MODE OF PROCUREMENT PB
 CS No. NOA-2024-008-009 AC No. R2024-019
 DATE OF P.O. January 12, 2023

TO: Supplier/Dealer Contractor HELANDE KIDNEY CARE, INC.
 Address: 3rd Flr. Jafer Bldg., No. 118 west Ave., Philam 1, Quezon City, Meytro Manila Tel: 7120-7933

Department/Office/Division/Section/Unit where delivery
 Is to be made: Supply & Property Section
 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. _____ Amount P _____

Item No.	QTY.	UNIT	ARTICLES	UNIT COST	TOTAL COST
			Balance Forwarded		1,750,560.00 wwwwww (One million seven hundred fifty thousand five hundred sixty pesos only)

Penalty Clause for Delayed or Unsatisfactory Deliveries:

- 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
- Excess in price, if procured from third parties, through alternative mode of procurement and
- In case of bidding, forfeiture of performance bond

Additional Instruction & Conditions:

- Staggered Delivery / Payment
- Delivery will take effect upon receipt of delivery confirmation of quantity/date
- Delivery is w/in 7 working days upon receipt of delivery confirmation
- PCMC has the right to reject or cancel any item in this PO for justifiable and reasonable grounds where the award will not benefit the Government
- Terms and conditions specified on Notice of Award

Funding Code 5-02-03-080 *msg 1/22/24*

TOTAL AMOUNT P 1,750,560.00 *MY*

FUNDS AVAILABLE: P 1,750,560.00
msg 1/22
 LEA M. VILLALOBOS, CPA, MBA
 Chief Accountant

- Attachments: Nephro-2024-01
- P.R. No. _____
 - Abstract of Canvass/Bids
 - Canvass Sheet/Tender of Bids
 - Notarized Certification of Exclusive Distributor
 - Justification
 - Others NOA-2024-008-009 / NTP-PROC-2024-088

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.

APPROVED:
SB Gonzalez
 SONIA B. GONZALEZ, M.D., MSChSM, MPM
 Executive Director *SB*

(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: www.pcmc.gov.ph email: officeofthedirector@pcmc.gov.ph
Trunk Line: 8588-9900 to 20 Direct Line: 8924-6601

NOTICE TO PROCEED
NTP-PROC-2024-088

January 12, 2023

HELANDE KIDNEY CARE, INC.
Jafer Building, 118 West Avenue
Quezon City
Tel: (+63) 950-828-5090 / 8751-7051
Email Add: bloodpurificationaml@gmail.com

Sir/Madam:

This is to inform you that Purchase Order No. 76191 as a result of Public Bidding
for the Procurement of Various Direct Medical Supplies - CY2023
has been approved.

You may now proceed with the delivery of the items listed in the attached Purchase Order within
7 (Seven) working days from receipt of this notice and / or Delivery Order Slip for
Staggered Delivery.


SONIA B. GONZALEZ, M.D., MScHSM, MPM
Executive Director

CONFORME:
Received Original

Signature Over Printed Name
Authorized Representative
Date: _____