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 MEDLINK MARKETING, INC				NTER P. R. NO MODE PUBLI Om CS No. DATE C	MODE OF PROCUREMENT PUBLIC BIDDING (Multi Year Project) CS No. AC No. DATE OF P.O.			
FO: Supplier Address:		o oniti di ti to i	Avenue, Quezon City Tel:					
Department/	/Office/D	ivision/Section/Unit	where delivery	Delivery period: 7	0 .	ther Terms:		
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		Note: Fo	Terms and Conditions pe Conforme to the attach r the use of Pathology (Multi Year Pro ies shall have at least	ed Terms of Referen Division-Bloodban ject: 3rd Year)	ce k (CY-2024)	fift	2,553,600.00 vvvvvvvvvvvvvvvvvvvvvvvvvvvvvvvvv	
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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-2024-102

January 22, 2024

MEDLINK MARKETING, INC.

Suite 301 77 Visayas Avenue, Quezon City Tel: 8928-7690

Sir/Madam:

This is to inform you that Purchase Order No. <u>76209</u> for the 3rd Year of Multi-Year Project for the Procurement of <u>One (1) Lot Supply and Delivery of supplies/consumables under Machine</u> <u>Placement Agreement for three (3) years for Apheresis Kits with Anticoagulant and free use</u> <u>of Two (2) units Latest Model of Continuous-flow Apheresis machines for both therapeutic</u> <u>procedures for pediatric patients and donor platelet collection</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: _____



