



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 76215 N^o 76212
 FOR SUPPLIES OR EQUIPMENT
 P. R. No. PATHO-RTU-2024-10 Dated: 10/13/2023
 MODE OF PROCUREMENT
PUBLIC BIDDING (Multi Year Project)
 CS No. _____ AC No. _____
 DATE OF P.O. January 23, 2024

TO: Supplier/Dealer Contractor **METRO DRUG, INC. JVA with Interpharma Holdings and Management Corp.**
 Address: Sta. Rosa Estate, Brgy. Macabaling, Sta. Rosa, Laguna, Tel. No.: 8424-1228; Email Add: Adizon@metrodrug.com.ph

Department/Office/Division/Section/Unit where delivery
 Is to be made: Materials Management Division
 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
One (1) Lot Supply and Delivery of reagents/ consumables under Reagent Tie-Up Agreement for Three (3) years for Hepatitis B profile, Thyroid profile, Anti-HAV IgM, CMV IgM, Toxoplasma IgM, Rubella IgM, AFP, B-HCG, Serum Ferritin, Cortisol, Intact PTH and Total Vitamin D Assays and free use of One (1) unit Roche Immunology analyzer (cobas e 411 analyzer)					
1	4	kit	Elecsys AFP, 100 tests per kit, Roche	20,900.00	83,600.00
2	4	kit	Elecsys A-HBc II, 100 tests per kit, Roche	22,000.00	88,000.00
3	6	kit	Elecsys Anti-HBs II, 100 tests per kit, Roche	25,000.00	150,000.00
4	3	kit	Elecsys CMV IgM, 100 tests per kit, Roche	44,650.00	133,950.00
5	25	kit	Elecsys Ferritin, 100 tests per kit, Roche	22,705.00	567,625.00
6	4	kit	Elecsys A-HaV IgM, 100 tests per kit, Roche	27,550.00	110,200.00
7	2	kit	Elecsys HBeAg, 100 tests per kit, Roche	35,000.00	70,000.00
8	8	kit	Elecsys HBsAg II, 100 tests per kit, Roche	25,000.00	200,000.00
9	2	kit	Elecsys A-Hbe, 100 tests per kit, Roche	40,000.00	80,000.00
10	7	kit	Elecsys TSH, 200 tests per kit, Roche	32,300.00	226,100.00
11	3	kit	Elecsys Rubella IgM, 100 tests per kit, Roche	49,400.00	148,200.00
12	7	kit	Elecsys FT3 III, 200 tests per kit, Roche	31,350.00	219,450.00
13	7	kit	Elecsys FT4 III, 200 tests per kit, Roche	38,000.00	266,000.00
14	3	kit	Elecsys Toxo IgM, 100 tests per kit, Roche	43,700.00	131,100.00
15	4	kit	Elecsys HCG+β, 100 tests per kit, Roche	23,750.00	95,000.00
16	2	kit	Elecsys Cortisol II, 100 tests per kit, Roche	31,000.00	62,000.00
17	4	kit	Elecsys PTH (Intact), 100 tests per kit, Roche	37,000.00	148,000.00
18	3	kit	Elecsys Vitamin D Total, 100 tests per kit, Roche	60,000.00	180,000.00
					2,959,225.00
*** Nothing follows ***					vvvvvvvvvvvv
* With the same Terms and Conditions per attached Memorandum of Agreement Conforme to the attached Terms of Reference Note: For the use of Pathology Division (CY-2024) (Multi Year Project: 3rd Year)					(Two million nine hundred fifty nine thousand two hundred twenty five pesos)
All deliveries shall have at least One (1) year expiration period.					

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 Funding Code _____ **TOTAL AMOUNT P 2,959,225.00**

FUNDS AVAILABLE:
LEA M. VILLALOBOS, CPA, MBA
 Chief Accountant
 APPROVED:
SONIA B. GONZALEZ, MD, MSChSM, MPM x BAC Reso No.2024-01-051
 Executive Director x NOA-2022-013
 x NTP-PROC-2024-108

Attachments:
 P.R. No. PATHO-RTU-2024-10
 Abstract of Canvass/Bids
 Canvass Sheet/Tender of Bids
 Notarized Certification of Exclusive Distributor
 Justification
 Others _____

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 76215
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PUBLIC BIDDING (Multi Year Project)
 CS No. _____ AC No. _____
 DATE OF P.O. January 23, 2024

TO: Supplier/Dealer Contractor **METRO DRUG, INC. JVA with Interpharma Holdings and Management Corp.**
 Address: Sta. Rosa Estate, Brgy. Macablang, Sta. Rosa, Laguna, Tel. No.: 8424-1228; Email Add: Adizon@metrodrug.com.ph

Department/Office/Division/Section/Unit where delivery Is to be made: Materials Management Division
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				<i>Balance forwarded</i>	2,959,225.00

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. 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.
 2. Excess in price, if procured from third parties, through alternative mode of procurement; and
 3. In case of bidding, forfeiture of performance security equal to 5% of the undelivered item/s.

Additional instructions & conditions:
 1. Staggered Delivery/Payment
 2. Delivery will take effect upon receipt of Delivery Confirmation of Quantity/Date
 3. Delivery is within 7 working days upon receipt of Delivery Confirmation
 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.

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Funding Code 5-02-00-040 *mgd 2/16/24*

FUNDS AVAILABLE: ₱ 2,959,225.00
LEA M. VILLALOBOS, CPA, MBA
 Chief Accountant

Attachments:
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 Abstract of Canvass/Bids
 Canvass Sheet/Tender of Bids
 Notarized Certification of Exclusive Distributor
 Justification
 Others

APPROVED:
SONIA B. GONZALEZ, MD, MSchSM, MPM
 Executive Director

x BAC Reso No.2024-01-051
 x NOA-2022-013
 x NTP-PROC-2024-108

TOTAL AMOUNT P 2,959,225.00

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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-2024-108**

January 23, 2024

METRO DRUG, INC.

JVA with Interpharma Holdings and Management Corp.

Sta. Rosa Estate, Brgy. Macabling,



Sta. Rosa, Laguna

Tel. No.: 8424-1228 Email Add: Adizon@metrodrug.com.ph

Sir/Madam:

This is to inform you that Purchase Order No. 76212 for the 3rd Year of Multi-Year Project for the Procurement of One (1) Lot Supply and Delivery of reagents/ consumables under Reagent Tie-Up Agreement for Three (3) years for Hepatitis B profile, Thyroid profile, Anti-HAV IgM, CMV IgM, Toxoplasma IgM, Rubella IgM, AFP, B-HCG, Serum Ferritin, Cortisol, Intact PTH and Total Vitamin D Assays and free use of One (1) unit Roche Immunology analyzer (cobas e 411 analyzer) has been approved.

You may now proceed with the delivery of items listed in the attached Purchase Order within seven (7) working days 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: _____