



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 **N^o 76259**
FOR SUPPLIES OR EQUIPMENT
 P. R. NO. **PERI 2023-007** Dated: **August 30, 2023**
MODE OF PROCUREMENT
Competitive Bidding ✓
 CS No. _____ AC No. _____
 DATE OF P.O. **February 1, 2024** ✓

TO: Supplier/Dealer Contractor **EVERYDAY ENTERPRISE** ✓
 Address: _____
 Angus Complex 81-a, MC Arthur Highway Manila, Davao City, Tel. No.: (+63) 82 224 0678 / (+63) 976 326 9693

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
 Performance Security Posted: Surety Bond No. **U-6(13)-4000711-00**
 Cash / Cashier's / Manager's Check No. _____
 PCMC O.R. No. _____ Amount P **534,000.00**

Item No.	QTY.	UNIT	ARTICLES	UNIT COST	TOTAL COST
1	2 ✓	unit ✓	Supply and Delivery of High-End Electric Delivery Room Bed Brand/Model: TECHARTMED ET400B ✓	890,000.00 ✓ **One Million Seven Hundred Eighty Thousand Pesos** ✓	1,780,000.00 ✓
A. SPECIFICATIONS 1 Length: 1780mm ✓ 2 Width: 600mm ✓ 3 Elevations: 680mm - 880mm ✓ 4 Tabletop : 304 stainless steel ✓ 5 Elevations column: 304 rectangular tube and 304 stainless steel cover ✓ 6 Safe working load of the table: 173kg, Back plate: at 50kg, buttocks plate: at 95kg and leg plate: at 25kg ✓ 7 Trendelenburg angle: 8 degrees ✓ 8 Reverse trendelenburg angle: 20 degrees ✓ 9 Back plate up and down: 45 and 7 degrees ✓ 10 Base: SS304 board with 304 stainless steel cover ✓ 11 Foot switch to control tabletop elevations, trendelenburg/ reverse trendelenburg and black plate ✓ 12 Back up battery in case of power failure, continuous use up to 2 hours, charging time: 24 hours, standby power: approximately 7 days: Internal or Back-up UPS ✓ 13 The unit will be operated at 220 ± 10% rated voltage of bed can operate to 198 to 242 volts, 60 Hertz ✓ 14 No separate volt conversion ✓ 15 Power consumption of the unit is ≥ 1 kW ✓ 16 Mechanical parts is of heavy-duty type ✓ B. Accessories per unit 1 Mattress, seamless polyurethane leather with foam sponge, thickness at 7cm size or dimensions as per manufacturer's specification ✓ 2 Arm support ✓ 3 Handle ✓ 4 304 stainless steel fixing clamp ✓					

Funding Code _____ **TOTAL AMOUNT P 1,780,000.00**

FUNDS AVAILABLE:

 Chief Accountant
APPROVED:

 Executive Director

Attachments:
 P.R. No. _____
 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



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
FOR SUPPLIES OR EQUIPMENT
 P. R. NO. **PERI 2023-007** Dated: **August 30, 2023**
 MODE OF PROCUREMENT
Competitive Bidding
 CS No. _____ AC No. _____
 DATE OF P.O. **February 1, 2024**

TO: Supplier/Dealer Contractor **EVERYDAY ENTERPRISE** ✓
 Address: _____
 Angus Complex 81-a, MC Arthur Highway Manila, Davao City, Tel. No.: (+63) 82 224 0678 / (+63) 976 326 9693

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
1	2	unit	Supply and Delivery of High-End Electric Delivery Room Bed Brand/Model: TECHARTMED ET400B 5 Knee crutch ✓ 6 Pedal ✓ 7 Leg support ✓ 8 Waste basin ✓ 9 Hand remote ✓ 10 Foot switch ✓ 11 1 unit- AVR, Brand /Model : Secure SVC 1000VA ✓ C. Warranty Two (2) years warranty on parts and services including quarterly preventive maintenance for High- End Electric Delivery Room Bed ✓ D. With duly notarized certificate from Distributor - EVERYDAY ENTERPRISE ✓ Certifies that: i. Parts, accessories and consumables are readily available at the authorized Philippine service center/s for a period of five (5) years after the warranty period; ✓ ii. Has available competence in-house technical specialist in handling and providing technical support as well as maintenance of the equipment being offered; and ✓ iii. That it will conduct training for proper operation and maintenance to end-users of the equipment upon delivery; and ✓ iv. shall provide replacement/back-up unit while the delivered unit is being repaired. ✓ E. With duly notarized certificate from Principal Manufacturer - NINGBO TECHART MEDICAL EQUIPMENT CO. LTD ✓ Certifies that: i. All the terms and conditions stated in bidding documents per IRR of RA 9184 and corresponding contract for the project will be honored including in the event that a change of dealership will occurs during the duration of the contract up to the warranty and preventive maintenance period. ✓ ii. The expected useful life of the equipment under normal use is at least seven (7) years of continues operation ✓ iii. Guarantee on availability of all spare parts, accessories and consumables at least for the next five (5) years from testing, commissioning, acceptance and delivery; ✓	**One Million Seven Hundred Eighty Thousand Pesos**	1,780,000.00

Funding Code _____ **page 2 of 4** **TOTAL AMOUNT P 1,780,000.00**

FUNDS AVAILABLE: _____
 Chief Accountant _____
 APPROVED: _____
 Executive Director _____

Attachments:
 P.R. No. _____
 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



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 76259
 FOR SUPPLIES OR EQUIPMENT
 P. R. NO. PERI 2023-007 Dated: August 30, 2023
 MODE OF PROCUREMENT
Competitive Bidding
 CS No. _____ AC No. _____
 DATE OF P.O. February 1, 2024

TO: Supplier/Dealer Contractor EVERYDAY ENTERPRISE
 Address: _____
Angus Complex 81-a, MC Arthur Highway Manila, Davao City, Tel. No.: (+63) 82 224 0678 / (+63) 976 326 9693

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
1	2	unit	Supply and Delivery of High-End Electric Delivery Room Bed Brand/Model: TECHARTMED ET400B iv. That it has competence in handling and providing technical support as well as maintenance of the equipment being offered; and ✓ v. Consumer Guidelines on Disposal ✓ 1. Ensure that the unit is properly decontaminated according to established protocols. Clean and disinfect the table thoroughly to eliminate any potential infectious agents. ✓ 2. Clearly label the unit as "non-functional" or out of service. Include documentation detailing history, maintenance records and any information relevant to its use. ✓ 3. Separate different components of the unit, some parts may be recyclable or require different disposal methods ✓ 4. Contact local health authorities or environmental agencies to understand regulations and guidelines for the disposal of medical equipment. ✓ 5. Explore recycling options for materials that make up the unit. Some components, such as metals or plastics, may be recyclable. Coordinate with local recycling facilities to ensure proper handling. ✓ ✓ 6. Arrange for disposal through authorized medical waste disposal facilities or companies as they are equipped to handle medical equipment and waste in compliance with regulations ✓ 7. Keep detailed records of the disposal process, dates, methods used. This may be required for regulatory compliance. ✓ 8. Adhere to environmental guidelines to minimize the impact of disposal on the surrounding ecosystem. This may include proper waste segregation and disposal in accordance with environmental laws. ✓ 9. If the unit is still in good condition and meets safety standards, consider donating it to medical facilities in need or explore options for resale. Ensure that all safety and regulatory requirements are met. ✓	**One Million Seven Hundred Eighty Thousand Pesos**	1,780,000.00

Funding Code _____

FUNDS AVAILABLE:

Chief Accountant

APPROVED:

Executive Director

Attachments:

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

TOTAL AMOUNT P **1,780,000.00**

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



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 76259
 FOR SUPPLIES OR EQUIPMENT
 P. R. NO. **PERI 2023-007** Dated: **August 30, 2023**
 MODE OF PROCUREMENT
Competitive Bidding
 CS No. _____ AC No. _____
 DATE OF P.O. **February 1, 2024**

TO: Supplier/Dealer Contractor **EVERYDAY ENTERPRISE** ✓
 Address: _____
 Angus Complex 81-a, MC Arthur Highway Manila, Davao City, Tel. No.: (+63) 82 224 0678 / (+63) 976 326 9693

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. CU-6(13)-46000711-06
 Cash / Cashier's / Manager's Check No. _____
 PCMC O.R. No. _____ Amount P. 534,000.00

Item No.	QTY.	UNIT	ARTICLES	UNIT COST	TOTAL COST
1	2	unit	Supply and Delivery of High-End Electric Delivery Room Bed Brand/Model: TECHARTMED ET400B DELIVERY PERIOD: Thirty to Forty Five(30-45) Calendar Days upon receipt of Purchase Order / Notice to Proceed. ✓ <p style="text-align: center;">Note: For the use of Perinatal Division ***** Nothing Follows*****</p>	**One Million	1,780,000.00 Seven Hundred Eighty Thousand Pesos**

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.

Funding Code 1-04-05-110 *2021 Ed 639M* page 3 of 3
TOTAL AMOUNT P 1,780,000.00 ✓

FUNDS AVAILABLE: 1,780,000.00
LEA M. VILLALOBOS, CPA
 Chief Accountant
 APPROVED:
SONIA B. GONZALEZ, MD, MSChSM, MPM
 Executive Director
 Attachments:
 P.R. No. **PERI 2023-007**
 Abstract of Canvass/Bids
 Canvass Sheet/Tender of Bids
 Notarized Certification of Exclusive Distributor
 Justification
 Others
 x BAC RESO NO. R2024-01-069 ✓
 x NOA-2024-022 ✓
 x NTP-PROC-2024-121 ✓

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



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-2024-121

February 1, 2024

EVERYDAY ENTERPRISE

Angus Complex 81-a, MC Arthur Highway Manila,
Davao City
Tel. No.: (+63) 82 224 0678 / (+63) 976 326 9693
Email add.: info.everydayenterprise@gmail.com

Sir/Madam:

This is to inform you that Purchase Order No. 76259 as a result of Public Bidding for the purchase of **Supply and Delivery of Two (2) Units High-End Electric Delivery Room Bed (Brand: TECHARTMED ET400B.)** has been approved.

You may now proceed with the delivery of the items listed in the attached Purchase Order within **Thirty to Forty Five (30-45) Calendar Days upon receipt of Purchase Order / Notice To Proceed.**

SONIA B. GONZALEZ, MD MScHSM, MPM
Executive Director

CONFORME:
Received Original

Signature Over Printed Name
Authorized Representative
Date: _____

