



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 76584**
FOR SUPPLIES OR EQUIPMENT 76584
 P. R. NO. RAD-2024-06 ✓ Dated: 03/14/2024 ✓
 MODE OF PROCUREMENT NP 53.10 ✓
 CS No. _____ AC No. 2024-208NM(NP)
 DATE OF P.O. APRIL 30, 2024 ✓

TO: Supplier/Dealer Contractor **ARDENHILLS SUITES CORPORATION** ✓
 Address: 1 Scout Albano, Diliman, Quezon City
Contact No.: 0995-461-6396 Email Address: jjamisola@ardenhillssuites.com
 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
1	1 ✓	lot ✓	SEMINAR WORKSHOP VENUE, ACCOMMODATION AND MEALS ✓ Date: May 09-10, 2024 (Thursday-Friday); 7:00AM - 6:00PM ✓ Location: Quezon City ✓ Pax: 123 pax/day ✓ Live in: with Breakfast - 2 Speaker and 1 Monitor (4,500.00/pax/night) ✓ Live out: with Morning Snack, Lunch and Afternoon Snack for 246 Participants (1,291.00/pax/day) ✓ Room Accommodation: 3 Deluxe Room (Solo) ✓ (with Complimentary of 4 Deluxe Room - Triple Connecting) Inclusions: » 2-3 pcs LCD Projector with screen or one (1) huge LED wall ✓ » Spacious Main Stage, Podium, Philippine Flag, Clear Sound System ✓ » 1-2 pcs Wireless Microphone, Free-flowing coffee and/or tea ✓ » Function Hall (07AM-06PM) with at least 121 capacity ✓ » 1-2 pcs Clean Water Dispenser (hot/cold) with purified drinking water ✓ » Charging outlet/adaptor and extension cord ✓ » Complimentary Rooms for Organizer ✓ » Complimentary Parking for Participants ✓ » Elevator with capability to carry and transport mobile x-ray equipment ✓ NOTE: FOR THE USE OF RADIOLOGY DIVISION ***** nothing follows *****	331,086.00 ✓	331,086.00 vvvvvvvvvv (Three Hundred Thirty One Thousand Eighty Six Pesos Only) ✓

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 V-02-02-010 *ngd/sfs* **TOTAL AMOUNT P** 331,086.00 ✓

FUNDS AVAILABLE: ₱ 331,086.00
gualahan sfs
LEA M. VILLALOBOS, CPA, MBA
 Chief Accountant

APPROVED:
Asbegy
SONIA B. GONZALEZ, MD, MSChSM, MPM
 Executive Director

- Attachments:
 P.R. No. RAD-2024-06 ✓
 Abstract of Canvass/Bids
 Canvass Sheet/Tender of Bids
 Notarized Certification of Exclusive Distributor
 Justification
 Others BAC RESO # R2024-04-204/ ✓
ALT-R2024-191 ✓
NOA-2024-060 ✓
NTP-PROC-2024-162 ✓

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

24-17325F



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-2024-162

ARDENHILLS SUITES CORPORATION
1 Scout Albano, Diliman, Quezon City
Contact No: 0995-461-6396

Sir/Madam:

This is to inform you that Purchase Order No. 76584 as a result of Negotiated Procurement for the **Seminar Workshop Venue, Accommodation and Meals** has been approved.

You may now proceed with the implementation of the said procurement project under the terms & conditions stated in the attached Purchase Order.


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

CONFORME:
Received Original

Signature Over Printed Name
Authorized Representative
Date: _____

