



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 **76801** **76801**
 FOR SUPPLIES OR EQUIPMENT
 P. R. NO. **PHAR-2024-008-GF** Dated: **2/19/2024**
 MODE OF PROCUREMENT
PUBLIC BIDDING
 CS No. _____ AC No. _____
 DATE OF P.O. **June 18, 2024**

TO: Supplier/Dealer Contract No. **UNILAB, INC.**
 Address: **No. 66 United Street, Mandaluyong City**
Tel No.: 8858-1000 / 0917-8864280, Email Add: mbmagno@unilab.com.ph

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
 Performance Security Posted: Surety Bond No.
 Cash / Cashier's / Manager's Check No.
 PCMC O.R. No. _____ Amount P **112,860.00**
 Other Terms: **LETTER OF CREDIT (L/C)**

Item No.	QTY.	UNIT	ARTICLES	UNIT COST	TOTAL COST
1	1,000	tab	Azithromycin tab 500mg blister/foil pack "Zenith" Zenith Tab 500mg Tab 3 Box Ss Ph [Ind-Swift Limited]	34.00	34,000.00
2	4,000	vl	Cefepime HCl vl 1g (IM,IV) "Axera" Axera 1g Via 10 Box Ss Ph [PT Darya-Varia Laboratoria-Thk]	348.00	1,392,000.00
3	50	bt	Cefixime drp 20mg/mL gran, 10mL "Tergecef" Tergecef 20mg Drp 10ml Ss Ph [Asian Antibiotics, Inc.]	124.00	6,200.00
4	200	bt	Cetirizine Dihydrochloride drp bt 2.5mg/mL Alnix 2.5mg Drp 10ml Ss Ph [Amherst Laboratories, Inc.]	80.00	16,000.00
5	1,300	bt	Cetirizine Dihydrochloride soln bt 5mg/5mL, "Alnix"30mL Alnix 5mg Syr 30ml Ss Ph [Amherst Laboratories, Inc.]	68.00	88,400.00
6	5,000	tab	Dexamethasone tab 4mg blister/foil pack "Decilone Forte"Decilone Forte 4 mg Tab 100box Ss Ph Asian Antibiotics, Inc.	24.00	120,000.00
7	200	amp	Isoxuprine HCl amp 5mg/mL, 2mL (IV,IM) "Isoxilan" Isoxilan 5mg/ml Amp 10 Ss Ph [Amherst Parenterals, Inc.]	154.00	30,800.00
8	200	tab	Isoxuprine HCl tab 10mg blister/foil pack "Isoxilan" isoxilan 10mg tab 100Box Ss Ph [Amherst Parenterals, inc.]	14.00	2,800.00
					1,690,200.00 vvvvvvvvv

- page 1 of 2 -

Funding Code _____

TOTAL AMOUNT P 1,690,200.00

FUNDS AVAILABLE:

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: _____

Chief Accountant

APPROVED:

Executive Director

Distribution : White (Original) - Attachment to payment
 Yellow (Duplicate) - Procurement

Pink - Supply and Property



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 Quezon Ave. Quezon City
 Tel. No.: 8588-9900 loc. 224, 226, 361, 355
 Fax no.: 85889997 • e-mail: pcmcproc@gmail.com

PURCHASE ORDER **7680176801**
 FOR SUPPLIES OR EQUIPMENT
 P. R. NO. **PHAR-2024-008-GF/001** Date: **2/19/2024**
 MODE OF PROCUREMENT
PUBLIC BIDDING
 CS No. _____ AC No. _____
 DATE OF P.O. **June 18, 2024**

TO: Supplier/Dealer Contractor **UNILAB, INC.**
 Address: **No. 66 United Street, Mandaluyong City**
 Tel No.: **8858-1000 / 0917-8864280**, Email Add: **mbmagno@unilab.com.ph**
 Department/Office/Division/Section/Unit where delivery
 Is to be made: **Supply & Property Section** Delivery period: 7 working days Other Terms: **LETTER OF CREDIT (B/L)**
 Location: **Ground Floor, PCMC Bldg.** Performance Security Posted: Surety Bond No. _____
 Special Instructions: **Ground Floor, PCMC Bldg.** Cash / Cashier's / Manager's Check No. _____
 PCMC O.R. No. _____ Amount P **112,860.00**

Item No.	QTY.	UNIT	ARTICLES	UNIT COST	TOTAL COST
			Balance forwarded		1,690,200.00
9	3,000	tbe	Mupicin Oint 5g Ss Ph "Mupicin" [Amherst Laboratories, Inc.]	104.00	312,000.00
10	5,500	scht	Oral Rehydration Salt (ORS 75) 4.1g sachet Hydrite (R) Grn 100 Ss Ph "Hydrite" [Amherst Laboratories, Inc.]	14.00	77,000.00

*****Nothing Follows*****
 Conforme to the attached Terms of Reference
 For the use of Pharmacy Division (CY-2024)
To be sourced from COB
All deliveries shall have at least One (1) year expiration period.

2,079,200.00
 vvvvvvvvv

****Two Million Seventy Nine Thousand
 Two hundred 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 security equal to 5% of the undelivered item/s.

Additional Instructions & conditions:

- Staggered Delivery/Payment**
- Delivery will take effect upon receipt of Delivery Confirmation of Quantity/Date**
- Delivery is within 7 working days upon receipt of Delivery Confirmation
- 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
- Terms and conditions specified on **Notice of Award.**

Funding Code **502-03-070** *page 2 of 2*
mag 6/21/24

TOTAL AMOUNT P 2,079,200.00

FUNDS AVAILABLE: **₱ 2,079,200.00**
6/25
LEA M. VILLALOBOS, CPA, DBA
 Chief Accountant

- Attachments:
- P.R. **PHAR-2024-008-GF/001**
 - Abstract of Canvass/Bids
 - Canvass Sheet/Tender of Bids
 - Notarized Certification of Exclusive Distributor
 - Justification
 - Others
 - BAC RESO # R2024-06-300**
 - NOA-2024-081-020**
 - NTP-PROC-2024-212**

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: _____

APPROVED:
6/25
SONIA B. GONZALEZ, MD, MSCHSM, MPM
 Executive Director

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-2024-212

June 18, 2024

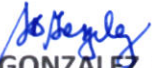

UNILAB, INC.

No. 66 United Street,
Mandaluyong City
Tel No.: 8858-1000 / 0917-8864280
Email Add: mbmagno@unilab.com.ph

Sir/Madam:

This is to inform you that Purchase Order No. **76801/76802** as a result of Public Bidding for the Procurement of Various Pharmaceutical Supplies CY 2024 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: _____

