



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 OF AWARD
NOA-2025-002-009

GETZ BROS. PHILIPPINES, INC.

5F West Wing, Estancia Offices
Capitol Commons, Meralco Ave.
Brgy. Oranbo, Pasig City
Tel No.: (02) 8784-0400
Email Add: customerservicesph@getzhealthcare.com

Dear Sir / Madam:

This is to inform you that based on the result of the Public Bidding conducted on October 28, 2024, for Various Pharmaceutical Supplies CY 2025 under Invitation to Bid No. IB-2025-002, as per BAC Resolution No. R2025-00-009, your proposal was found to be the Lowest Calculated and Responsive Bid (LCRB):

SET	ITEM NO.	QTY	UNIT	ITEM DESCRIPTION	BRAND, PACKING, SPECIFICATION, ETC.	MANUFACTURER	UNIT COST	TOTAL AMOUNT
A	138	2,500	bt	Lactulose syr bt 3.3g/5mL, 120mL	Lactulose 3.35G/5ml Syrup, 120ml Bottle/ 1's/Bottle	Lilac Opal Laboratories Pvt. Limited	87.34	218,350.00
VAT-EXEMPT								
B	2	33,700	tab	Amlodipine Besylate tab 5mg blister/foil pack	Amlodipine Besylate 5mg Tablet/ 20's/Pack	Lopicard Getz Pharma Pvt. Ltd.	2.09	70,433.00
B	25	3,200	vl	Insulin Biphasic Isophane Human (recomb DNA)70/30, 10mL (IM,SC)	Insulin Biphasic Isophane Human (Recomb Dna)70/30, 10ml (IM,SC) 1's/Vial	Insuget 70/30 Getz Pharma Pvt. Ltd.	158.00	505,600.00
B	26	1,200	vl	Insulin Isophane Human (recomb DNA) vl 100IU/mL, 10mL (IM,SC)	Insulin Isophane Human (Recomb Dna) VI 100lu/ml, 10ml (IM,SC)/ 1's/Vial	Insuget - N Getz Pharma Pvt. Ltd.	158.00	189,600.00
B	27	1,300	vl	Insulin Regular Human (recomb DNA) vl 100IU/mL, 10mL (IM,IV,SC)	Insulin Regular Human (Recomb Dna) VI 100lu/ml, 10ml (IM,IV,SC)/ 1's/Vial	Insuget - R Getz Pharma Pvt. Ltd.	158.00	205,400.00

GRAND TOTAL = Php 1,189,383.00

Terms and Conditions :

1. The prices of the awarded item(s) shall be valid until December 31, 2025.
2. Conformance on the attached Terms of Reference, if applicable
3. Staggered delivery, staggered payment.

Kindly disregard and report any form of solicitation using the name of the Executive Director and/or the PCMC. These unsanctioned requests are unlawful and will not be tolerated.



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4. Delivery Schedule: Within Seven (7) working days upon receipt of Delivery Order Slip.
5. Drugs and Medicines to be delivered should have expiration of at least one (1) year and longer or as expressed/required by Pharmacy Division.
6. The quantities specified are estimated requirements during the period and may be decreased depending upon the actual need of PCMC. It is understood therefore that PCMC is not bound to order / purchase all the items / quantities called for on this Notice of Award.
7. The supplier should submit Materials Safety Data Sheet upon initial delivery, if applicable.

You are hereby required to provide on or before 17 JAN 2025 the Performance Security in either of the following form:

FORM OF PERFORMANCE SECURITY	AMOUNT OF PERFORMANCE SECURITY (Equal to Percentage of the Total Contract Price)
a) Cash or cashier's/ manager's check issued by a Universal or Commercial Bank	Five percent (5%) <u>Php59,469.15</u>
b.) Bank draft/guarantee or irrevocable letter of credit issued by a Universal or Commercial Bank: Provided, however, that it shall be confirmed or authenticated by a Universal or Commercial Bank, if issued by a foreign bank	
c) Surety bond callable upon demand issued by a surety or insurance company duly certified by the Insurance Commission as authorized to issue such security.	Thirty percent (30%) <u>Php356,814.90</u>

Failure to provide the Performance Security shall constitute sufficient ground for cancellation of the award and imposition of penalties/forfeiture corresponding to the Bid Security posted.

Very truly yours,

M. Jopson
signed Jan. 7, 2025
MARIA EVA I. JOPSON, MD, MScHSM, MPM
Officer-in-Charge Executive Director *ESK*

Conforme:

This is to certify that the company has authorized me to accept this award, sign all related documents and hold the company bound by rules and laws applicable thereto.

I further certify that I have chosen the following mode (as checked) as the form of retention money required of us under R.A. 9184 Sec. 62.1.

- Bank Guarantee
- 1% Deduction from claims on the first payment for staggered deliveries

 Authorized Signatory
 (Signature over printed name)

 Designation

 Date

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