

Republic of the Philippines

## PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City

Date of P.O:

PURCHASE ORDER: 77851

Tel. No.: 8588-9900 Loc. 1329, 1330, 1331, 1332 PR NO: NEPHRO-2025-01 - Dated: 2024-09-25

MODE OF PROCUREMENT: PB (Goods)

2025-01-20

Fax No.: 85889997 • E-mail: pcmcproc@gmail.com

TO: Supplier/Dealer Contractor: HELANDE KIDNEY CARE, INC.

3rd flr, Jafer Bidg. No. 118 West Ave., Phiam 1, Q.C., M.M. / / 7120-7933

Other Terms: Alpha Insurance 8 Surety Company, inc. GC(3) 186767 4 Security Bond January 24, 20X Department/Office/Division/Section/Unit where delivery Delivery period: 7 Working Days Is to be made: Materials Management Division Performance Security Posted: Ground Floor, PCMC Bldg ☐ Bank Guarantee Location: ⊔ Cash

pecial I	 Instruction		No:	Amount P: 368,568.00	
em No	QTY	UNIT	ARTICLES		TOTAL COST
1	2/	PC ,	BILIRUBIN CARTRIDGE, ADULT  "Packing: x 1's  Specifications: Adsorbent Volume (mL) - 330	69,000.00	138,000.00
			Biocompatibility: Tested as required in ISO10993 Adsorbent Material: Polystyrene Divinylbenzene Anion Exchange Resin Housing Material: Polypropylene Sterilization Method: Moist Heat Sterilization Unit Package: 280mm(L) x 105mm(W) x 108mm(H), Brand: BS330 - Jafron" Jafron Biomedical Co., Ltd.		
2	3 ′	PC /	"Packing: x 1's Specifications: Adsorbent Volume (mL) - 80 Blood Volume (mL) - 50±10 Adsorbent Material: Polystyrene Divinylbenzene Anion Exchange Resin Housing Material: Polypropylene Sterilization Method: Moist Heat Sterilization, Brand: BS80 - Jafron"	45,000.00	135,000.00
3	6 .	PC ,	"Packing: x 1's Specifications: ID x OD x Length - (8x12x400) mm Priming Volume - (154±5) mL Sterile - Ethylene Oxide, Brand: Tianyimed"	7,500.00	45,000.00
4	2,	pc *	Ningbo Tianyi Medical Appliance Co., Ltd. Hemoperfusion Cartridge for Acute Poisoning  Packing: Box of 1's Specification: Loading Capacity(mL) = 230 ± 3 Volumn(mL) = 145 ± 5 Adsorbent Material = Styrene Divinylbenzene Copolymers Housing Material = Polycarbonate Sterilization Method = Irradiation Sterilization Unit Package = 236mm(L)100mm(W) x 102mm(H) 0.7kg"	22,000.00	44,000.00
5	12 •	рс	Jafron Biomedical Co., Ltd. Hemoperfusion Cartridge for Sepsis "Brand: HA330 Packaging: Box of 1's Specification: Adsorbent Volume (mL) - 330±3 Blood Volume (mL) - 185±5 Adsorbent Material - Secondary Crosslinked Styrene Divinylbenzene Copolymers Housing Material - Polycarbonate Sterilization Method - Irradiation Sterilization Unit Package - 290mm(L) x 105mm(W) x 105mm(H), Brand: HA230 - Jafron" Jafron Biomedical Co., Ltd.	35,380.00	424,560.00
6	10 /	pc /		44,200.00	442,000.00
			Blood Volume (mL) - 65±20 Adsorbent Material - Double Crosslinked Styrene-		



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PURCHASE ORDER: 77851

Date of P.O: 2025-01-20

Dated: 2024-09-25 PR NO: NEPHRO-2025-01

3. Delivery is within 7 Working Days upon receipt of Delivery

MODE OF PROCUREMENT: PB (Goods)

TO: Supp Address:			r Bldg. No. 118 West Ave., Phiam		7933		
	nade: _	Materia Ground	on/Section/Unit where delivery is Management Division Floor, PCMC Bldg	Delivery period: 7 Working Days Performance Security Posted:  Lack Lack Bank Guarantee No: Other Terms:  Security Bond Amount P:			
Item No	QTY	UNIT	ARTICLES		UNIT COST	TOTAL COST	
			divinylbenzene Copolymers Housing Material - Polycarbonate Sterilization Method - Irradiation Ste Jafron" Jafron Biomedical Co., Ltd.  xxxxxxxxxxxxxxxxxx Nothing Follo For the use of Nephrology - Hemo Dia All deliveries shall have at least 1	erilization, Brand: HA60 -		CONTRACTOR OF THE PROPERTY OF	
Ponalty Clay	use for Del	avad or Une	atiefactory Bolivorios	Additional instruc	tions & conditions:		
One-tenth cumulative as	h (1/10) of o mount of liq	ne percent (1 uldated dama	atisfactory Deliveries: (%) of the cost of unperformed portion for everyday of ages reaches 10% of the amount of the contract, the Properties of action and reme without prejudice to other courses of action and reme	delay. Once the rocuring Entity 1. Staggered Delive 2. Delivery will take		ivery Confimation of	

 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 TOTAL AMOUNT P 1,228,560.00 Funding Code G-02-03-080 CERTIFICATION **FUNDS AVAILABLE** This is to certify that I received today the Original ☐ PR No: NEPHRO-2025-01 copy of this Purchase Order, and held the ■ Abstract of Canvass/Bids: Company bound by the terms and stipulation of □ BAC Resolution No: R-2025-00-030 LEA M. VILLALOBOS, DBA, CPA the contract and other laws applicable ⊔ NOA No: 2025-024-003 . Chief Accountant ⊔ NTP No: 2025-089 ☐ PhilGEPS Ref No: APPROVED: LI AMRP No. MARIA EVA I. JOPSON MD. MSCHSM. MPM Signature over printed name OIC Executive Director Date:

Distribution:

Original -Duplicate -

Excess in price, if procurred 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.

Attachment to payment

Procurement/Materials Management Division

25-021157 Supply and Inventory Management System (SIMS)

under the circumstances

2/2

ADPD-PCMC-POF



## Republic of the Philippines DEPARTMENT OF HEALTH PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City 1100
website: <a href="mailto:www.pcmc.gov.ph">www.pcmc.gov.ph</a> email: <a href="mailto:officeofthedirector@pcmc.gov.ph">officeofthedirector@pcmc.gov.ph</a>
Trunk Line: 8588-9900 to 20 Direct Line: 8924-6601

## NOTICE TO PROCEED NTP-PROC-2025-089

January 20, 2024 HELANDE KIDNEY CARE, INC. Jafer Building, 118 West Avenue Quezon City Tel: (+63) 950-828-5090 / 8751-7051 Email Add: bloodpurificationaml@gmail.com Sir/Madam: This is to inform you that Purchase Order No. 77851, as a result of **Public Bidding** for the Procurement of Various Nephrology Hemodialysis/Peritoneal Dialysis Supples CY 2025 has been approved. You may now proceed with the delivery of the items listed in the attached Purchase Order within from receipt of this notice and / or Delivery Order Slip for 7 (Seven) working days Staggered Delivery. MARIA EVA VJOPSON, MD., MScHSM, MPM OIC-Executive Director CONFORME: Received Original Signature Over Printed Name Authorized Representative Date: