

Republic of the Philippines

PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City

Tel. No.: 8588-9900 Loc. 1329, 1330, 1331, 1332 PR NO: PHAR-2025-002-GF Dated: 2024-10-15

PURCHASE ORDER: 77720

Delivery period: 7 Working Days

Date of P.O:

2025-01-08

Letter of Creaty - BPI

Fax No.: 85889997 * E-mail: pcmcproc@gmail.com MODE OF PROCUREMENT: PB (Goods)

TO: Supplier/Dealer Contractor: ZUELLIG PHARMA CORPORATION JVA with INTERPHIL LABORATORIES INC.

KM 14 West Service Road SSH Corner Edison Ave., Brgy. Sun Valley, Parañaque City / phzpgovernmentopdteam@zuelligpharma.com / 908-2222 / 325-0641 / 0998 9617879

Continue Continue				on/Section/Unit where delivery Is Management Division	Performance Security Poster		020265 2034 5588	
Seem No						itee 🔟 Securi		
Material Material	pecial I				No:		TP: 2,626,405.2	
"Sandimmun Neoral 100mg/ml Oral Solution 50ml 1's " [Delpharm Huningue S.A.S.]	em No		UNIT	ARTICL	ES		TOTAL COST	
7600 cap Ciclosporin 100mg capsule bilster/foll pack	1	150	bt 🗸	"Sandimmun Neoral 100mg/ml Oral Solution 50ml 1's "		6,634.84	995,226.00	-
3 42000 tab Ciclosporin tab 25 mg blister/foil pack "Sandimmun Neoral 100mg Softgel Capsule 50's " [Catalent Germany Eberbach Gmbh] Oxcarbazepine 600mg tablet "Trileptal 600mg Film-Coated Tablet 50's " [Novartis Farma S.P.A.] Oxcarbazepine 60mg/ml., 100mL suspension "Trileptal 60mg/ml Suspension 100ml 1'S ' [Delpharm Huningue S.A.S.] / Valproic Acid syr bt 250mg/5mL, 120mL "Depakene 250mg/5ml Syrup 120ml 1'S " [P.T. Abbott Indonesia] / Atorvastatin calcium 10 mg tablet "Lipitor 10mg Tablet 100's " [Pfizer Pharmaceuticals Llc] / XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	2	7600	cap 🗸	Ciclosporin 100mg capsule bliste "Sandimmun Neoral 100mg Softe	133.57	1,015,132.00	-	
"Trileptal 600mg Film-Coated Tablet 50's " [Novartis Farma S.P.A.] Oxcarbazepine 60mg/mL, 100mL suspension "Trileptal 60mg/ml Suspension 100ml 1'S ' [Delpharm Huningue S.A.S.] / Valproic Acid syr bt 250mg/5mL, 120mL "Depakene 250mg/5ml Syrup 120ml 1'S " [P.T. Abbott Indonesia] / Atorvastatin calcium 10 mg tablet "Lipitor 10mg Tablet 100's " [Pfizer Pharmaceuticals Llc] / XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	3	42000	tab 🗸	Ciclosporin tab 25 mg blister/foil "Sandimmun Neoral 100mg Softs	31.72	1,332,240.00	-	
"Trileptal 60mg/ml Suspension 100ml 1'S ' [Delpharm Huningue S.A.S.] / Valproic Acid syr bt 250mg/5mL, 120mL · "Depakene 250mg/5ml Syrup 120ml 1'S " [P.T. Abbott Indonesia] / Atorvastatin calcium 10 mg tablet "Lipitor 10mg Tablet 100's " [Pfizer Pharmaceuticals Llc] /	4	16400		"Trileptal 600mg Film-Coated Tal [Novartis Farma S.P.A.]		26.65	437,060.00	1
"Depakene 250mg/5ml Syrup 120ml 1'S " [P.T. Abbott Indonesia] - Atorvastatin calcium 10 mg tablet "Lipitor 10mg Tablet 100's " [Pfizer Pharmaceuticals Lic] -	5			"Trileptal 60mg/ml Suspension 1 [Delpharm Huningue S.A.S.]	00ml 1'5 '		2,028,619.60	
"Lipitor 10mg Tablet 100's " [Pfizer Pharmaceuticals Llc] / XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	6	20825	bt -	"Depakene 250mg/5ml Syrup 12		345.46	7,194,204.50	ľ
Division (CY 2021) To be sourced from COB All deliveries shall have at least One (1) year expiration period - VAT EXEMPT - Hul Peso	7	1300	tab 🖍	"Lipitor 10mg Tablet 100's " [Pfizer Pharmaceuticals Lic] XXXXXXXXXXXXXXXXXXXX Nothing For the use of Pharmaceuticals and pharmaceuticals are the use of Pharmaceuticals and pharmaceuticals are the use of Pharmaceutic	ollows xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	6.40	8,320.00 P 13,010,802.10 (Thirteen	,
				Division (CY 2024) To be sourced from Co One (1) year expir	OB All deliveries shall have at least ration period		Million Ten Thousand Eight Hundred Two Pesos And Ten Centavos)	,
nalty Clause for Delayed or Unsatisfactory Deliveries: Additional instructions & conditions:								

Penalty Gause for Delayed or Unsatisfactory Deliveries:

1. One-tenth (1/10) of one percent (196) of the cost of unperformed portion for everyday of delay. Once the cumulative amount of flegidated 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.

 Staggered Delivery/Payment
 Delivery will take effect upon receipt of Delivery Confimation of Quantity/Date

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

4. 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

Funding Code 50203010 mgd 1/1475

FUNDS AVAILABLE: 13010, 802.10

VILLALOBOS, DBA, CPA Chief Accountant

APPROVED

Attachment

□ PR No: **PHAR-2025-002-GF** ' □ Abstract of Canvass/Bids: 2025-001

☐ BAC Resolution No: R2025-00-009 ■ NOA No: NOA-2025-002-023

□ NTP No: 2025-005 . ☐ PhilGEPS Ref No: 11316716 /

AMRP No.

MARIA EVA I. JOPSON. MD. MSCHSM. MPM.

ma h OIC Executive Director

25-0117 SF

Distribution:

Origina! Duplicate Attachment to payment

Procurement/Materials Management Division

CERTIFICATION

TOTAL AMOUNT P 13,010,802.10

curchase Order, and held the company bound by the unit and stipulation of the contract and other asy applicable. This is to certify that I rece today the Original

Date:



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-2025-005

January 8,2025

ZUELLIG PHARMA CORP. JV with INTERPHIL LABORATORIES INC.

KM 14 West Service Road SSH Corner Edison Avenue, Brgy. Sun Valley, Parañaque City Tel. No. (02) 908-2222 Fax No. (02) 325-0641

Sir/Madam:

This is to inform you that Purchase Order No. <u>77719/77720</u> as a result of <u>Public Bidding</u> for the Procurement of <u>Various Pharmaceutical Supplies CY 2025 has been approved.</u>

You may now proceed with the delivery of items listed in the attached Purchase Order within <u>seven (7) working days</u> from receipt of this notice and/or Delivery Order Slip for Staggered Delivery.

MARIA EVA I.JOPSON, MD, MScHSM, MPM OIC, Executive Director

CONFORME:

Received Origina

Signature Over Printed Name
Authorized/Representative

Date:

