



Republic of the Philippines
PHILIPPINE CHILDREN'S MEDICAL CENTER
Quezon Avenue, Quezon City
Tel. No.: 8588-9900 Loc. 1329, 1330, 1331, 1332
Fax No.: 85889997 • E-mail: pcmcproc@gmail.com

PURCHASE ORDER: **78117**
Date of P.O.: **2025-03-18**
PR NO: **PATHO-2025-01** Dated: **2024-09-26**
MODE OF PROCUREMENT: **NP-Emergency**
(53.2)

TO: Supplier/Dealer Contractor: **DIAMED ENTERPRISE**
Address: **10683 Sta. fe Subd., Los Baños, Laguna / marlane.diamed@gmail.com / 584-4762 / 049 536-0625 / 049 310-0878**

Department/Office/Division/Section/Unit where delivery
Is to be made: **Materials Management Division**
Location: **Ground Floor, PCMC Bldg**
Special Instruction
Delivery period: 7 Working Days Other Terms: _____
Performance Security Posted:
☐ Cash ☐ Bank Guarantee ☐ Security Bond
No: _____ Amount P: _____

Item No	QTY	UNIT	ARTICLES	UNIT COST	TOTAL COST
1	1	kit	Alpha-Globin Assay Kit α-Globin Strip Assay (10 test) Cat#: 4-160	82,250.00	82,250.00
2	1	kit	Beta-Globin Assay Kit β-Globin Assay SEA (20 test) Cat#: 4-150	141,050.00	141,050.00
xxxxxxxxxxxxxxxxxxxxx Nothing Follows xxxxxxxxxxxxxxxxxxxxxxxx For the use of Pathology Division *** All deliveries shall have at least One (1) year expiration period ***					P 223,300.00 (Two Hundred Twenty Three Thousand Three Hundred Pesos)

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.

Funding Code V-02-03-080 , <i>mgd 3/24</i>	TOTAL AMOUNT P 223,300.00
FUNDS AVAILABLE: P 223,300.00 <i>[Signature]</i> LEA M. VILLALOBOS, DBA, CPA Chief Accountant APPROVED: <i>[Signature]</i> MARIA EVA I. JOPSON, MD, MSChSM, MPM OIC Executive Director	Attachment <input type="checkbox"/> PR No: PATHO-2025-01 ✓ <input type="checkbox"/> Abstract of Canvass/Bids: 2024-077 ✓ <input type="checkbox"/> BAC Resolution No: R2025-02-116 /ALT-R2025-094 ✓ <input type="checkbox"/> NOA No: _____ <input type="checkbox"/> NTP No: _____ <input type="checkbox"/> PhilGEPS Ref No: _____ <input type="checkbox"/> AMRP No: 2025-159 ✓ CERTIFICATION This is to certify that I received today the Original 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: Original - Attachment to payment Duplicate - Procurement/Materials Management Division	