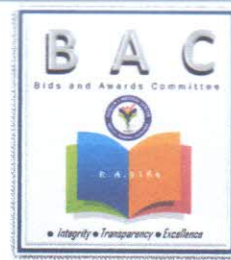




Republic of the Philippines
 Department of Health
REGION 1 MEDICAL CENTER
 Arellano Street, Dagupan City
BAC Office
 Tel No.: (075) 523-18-65
 Telefax: (075) 523-41-03
r1mcsbac2012@gmail.com



NOTICE OF AWARD

July 25, 2018

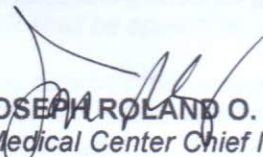
MARVIC JIM F. ENCINA
 Authorized Representative
LABMATE PHARMA, INC.
 3rd Floor Jafer bldg.. 118 West Avenue, Quezon City

Sir:

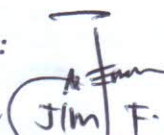
We are informing you that your Bid dated **July 17, 2018** for the **PROCUREMENT OF VARIOUS LABORATORY AND NVBSP SUPPLIES AND REAGENTS OAL FOR CY 2018 WITH BID REFERENCE NO. 20-2018**, is **AWARDED** to you for an amount equivalent to One Peso (Php1.00) as consideration for the option granted to the Region 1 Medical Center to buy the items (listed as Annex ("A") pursuant to the Revised Guidelines on the Use of Ordering Agreement, in accordance to the Revised IRR of RA 9184.

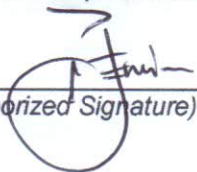
You are therefore required to provide within ten (10) calendar days the performance security in an amount equivalent to the prescribed percentage of the total contract price in accordance with ITB Clause No. 32 of Section II – Instruction to Bidders. Failure to provide the performance security shall constitute sufficient ground for cancellation of the award and forfeiture of the bid security.

Approved By:


JOSEPH ROLAND O. MEJIA, MD, FPSMS, MBAH, MPA, DHSM, DCDM, CESE
 Medical Center Chief II

Conforme:


MARVIC JIM F. ENCINA
 (Name of Representative of Bidder)


 (Authorized Signature)

 (Date)

Performance Security:

PERFORMANCE BOND
 Form of PS: CHECK NO. 0006713

Amount: P 129,318.75

Date : 8-20-2018



ANNEX "A"

PROCUREMENT OF VARIOUS LABORATORY AND NVBSP SUPPLIES AND REAGENTS FOR CY 2018 (IB No. 7 s, 2018)
 Bid Reference No.: 20-18

No.	Item / Description	Unit	QTY.	Unit Price	Total	Remarks
Line Items						
1	ABO Typing Card, 24's	kit	1,203	2,125.00	2,556,375.00	
2	Insulated Bag, small	piece	100	300.00	30,000.00	
Total Bid Price					₱ 2,586,375.00	
Total Bid Price (Amount in Words):				Two Million Five Hundred Eighty-Six Thousand Three Hundred Seventy-Five Pesos		
Name & Address of the Bidder:				LABMATE PHARMA, INC. 3 rd Floor Jafer bldg.. 118 West Avenue, Quezon City		

Terms & Conditions of OAL:

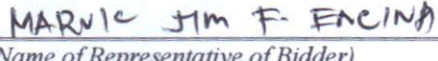
Notes:

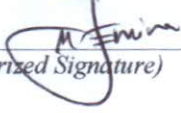
- (a) This ordering agreement shall not state or imply any agreement by the Region 1 Medical Center to place future contracts or make orders with the supplier/service provider.
- (b) The contract price indicated per item shall be fixed within the duration specified for this agreement.
- (c) This ordering agreement shall be valid for six (6) months, and/or if extended, shall not exceed one (1) year from the time the contract was entered into and executed by parties.
- (d) All rules and guidelines governing implementation of procurement contracts under RA 9184 and its Revised IRR shall be applicable.
- (e) The delivery order contracts/purchase order may be executed or issued as often as the need arises for every item within the validity of the contract. However, the aggregate amount or quantity executed shall not exceed the total contract price or quantity of items.

Approved by:


JOSEPH ROLAND O. MEJIA, MD, FPSMS, MBAH, MPA, DHSM, DCDM, CESE
 Medical Center Chief II

Conforme:


 (Name of Representative of Bidder)


 (Authorized Signature)

 (Date)