



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](mailto:r1mcsbac2012@gmail.com)

**NOTICE TO PROCEED**

**GLENN A. SINDAYEN**

*Owner*

**TESORO ENTERPRISES**

*No. 134 Del Carmen Subd., Poblacion West,  
 Calasiao, Pangasinan*

*Sir:*

The attached Contract Agreement having been approved, notice is hereby given to **TESORO ENTERPRISES** that delivery/ implementation/ work may proceed on the **Procurement of Various Hospital Equipment (OAL) for CY 2019 with Bid Reference No.29-2019** under **Invitation to Bid No. 4's 2019**, effective immediately.

Upon receipt of this notice, you are responsible for performing the services under the terms and conditions of the Agreement and in accordance with the Implementation Schedule as prescribed in the 2016 Revised IRR of RA 9184.

Please acknowledge receipt and acceptance of this notice by signing both copies in the space provided below. Keep one copy and return the other to the **REGION 1 MEDICAL CENTER.**

Very truly yours,

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

*I acknowledge receipt of this Notice on* \_\_\_\_\_  
*Name of the Representative of the Supplier.* *Glenn A. Sindayen*  
*Authorized Signature:* \_\_\_\_\_  
*[Signature]*