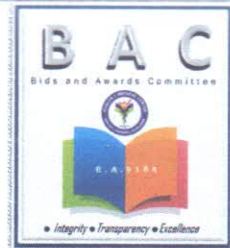




Republic of the Philippines  
 Department of Health  
**REGION 1 MEDICAL CENTER**  
 Arellano Street, Dagupan City  
**BAC Office**  
 Tel No.: (075) 523-18-65  
 Telefax: (075) 523-41-03  
[r1mcsbac2012@gmail.com](mailto:r1mcsbac2012@gmail.com)



## NOTICE OF AWARD

January 11, 2019

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

Sir:

We are informing you that your Bid dated **December 18, 2018** for the **SUPPLY AND DELIVERY OF VARIOUS HOSPITAL MATERIALS AND SUPPLIES UNDER OAL: LABORATORY/NVBSP & HISTOPATH FOR CY 2019 WITH BID REFERENCE NO. 03-2019**, 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)

JANUARY 21, 2019  
 (Date)

**Performance Security:**

UCPB

Form of PS: Irrevocable Domestic Standby Letter of Credit  
 No. 909-04-157-19-00045-9

Amount: 295,362.00

Date : JANUARY 29, 2019



ANNEX "A"

**SUPPLY AND DELIVERY OF VARIOUS HOSPITAL MATERIALS AND SUPPLIES UNDER OAL:  
 LABORATORY/INVBSB & HISTOPATH FOR CY 2019 (IB No. 1 s, 2018)**

Bid Reference No.: 03-2019

No.	Item / Description	Unit	QTY.	Unit Price	Total	Remarks
<b>Lot 3 Serology</b>						
1	DENGUE (IGG, IGM & NS1AG) X 10S	BOX	268	2,380.00	637,840.00	
2	H. PYLORI TEST KIT, 30s	KIT	148	4,200.00	621,600.00	
3	LEPTOSPIRA IGG/IGM KIT, RAPID TEST X 30S	KIT	56	7,050.00	394,800.00	
4	TROPONIN I X 25S	KIT	133	6,250.00	831,250.00	
5	TYPHOID ANTIBODY TEST X 25S	KIT	43	5,250.00	225,750.00	
<b>Total Bid Price</b>					<b>₱ 2,711,240.00</b>	

No.	Item / Description	Unit	QTY.	Unit Price	Total	Remarks
<b>Lot 13 Hemoglobin</b>						
1	DONOR HEMOGLOBIN CHECKER MICROCUVETTES	SET	150	6,600.00	990,000.00	
<b>Total Bid Price</b>					<b>₱ 990,000.00</b>	

No.	Item / Description	Unit	QTY.	Unit Price	Total	Remarks
<b>Lot 14 Transport Bag</b>						
1	BLOOD BAG, pre labeled insulated transport bag, 2x1	Box	1	30,000.00	30,000.00	
<b>Total Bid Price</b>					<b>₱ 30,000.00</b>	

No.	Item / Description	Unit	QTY.	Unit Price	Total	Remarks
<b>Line Items</b>						
15	ABO TYPING CARD, kit X 24S	Kit	1024	2,125.00	2,176,000.00	
<b>Total Bid Price</b>					<b>₱ 2,176,000.00</b>	

<b>Annex A</b>	<b>Total Price</b>	<b>₱ 5,907,240.00</b>
Total Bid Price (Amount in Words):	Five Million Nine Hundred Seven Thousand Two Hundred Forty Pesos	
Name & Address of the Bidder:	<b>LABMATE PHARMA, INC.</b> 3 <sup>rd</sup> 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.





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Approved by:

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

*Conforme:*

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

  
(Authorized Signature)

\_\_\_\_\_  
(Date)