

BATAAN GENERAL HOSPITAL AND MEDICAL CENTER

Balanga City, Bataan ISO-QMS 9001 Certified



NOTICE TO PROCEED

August 25, 2020

ANGELES UNIVERSITY FOUNDATION MEDICAL CENTER

MacArthur Highway, Angeles City

Dear Sir / Madame:

The attached Contract Agreement No. /Purchase Order No. 26 06 707 having been approved; notice is hereby given to **ANGELES UNIVERSITY FOUNDATION MEDICAL CENTER**that work may commencefor Dept. of Pathology and Laboratory (For Laboratory use only) effective on **August 25**, 2020/10 calendar days after the receipt of this notice.

After the 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.

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 **BGHMC – Procurement Section**

| | occurred to the contract of th |
|---|--|
| | Prepared by:/ |
| | Roselle M Carlos Administrative Assistant III |
| (| Checked by: Nolanda A. Soriao-Lansangan Procurement Head Reviewed and Recommended by: Marjerie Anne D. Mena Chief Administrative Officer Approved by: |
| | GLORY V. BALTAZAR, MD, MPH, MHA, CESe Head of Procuring Entity (HOPE) |
| | I acknowledge receipt of this Notice on |
| | Name of the Representative of the Bidder: |
| | Authorized Signature: |
| | The Head of the Procuring Entity or his duly authorized representative shall issue the Notice to proceed within seven (7) calendar days from the date of the approval of the contract. |
| | Posted by: Date: |
| | |



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PURCHASE ORDER

| Supplier: | ANGELES | S UNIVERSITY FOUNDATION MEDICAL CENTER | | P.O. No. : | 20-08. | 707 |
|--|---------------------|--|---|---------------------|----------------------|---------------------------|
| Address: | MacArthur | Highway, Angeles City | | Date: | Agust ' | 15, 20% |
| TIN: | | | | Mode of Procure | | rect Contracting |
| Gentlemen: | | | | <u> </u> | 1 | \ |
| Pleas | se furmish thi | s Office the following articles subject to the terms and conditions of | ontained he | erein: | | |
| Place of Deliver | y: BGH PI | ROPERTY AND SUPPLY SECTION | | Delivery Term: | 10 CD \ | _ |
| Date of Delivery | r: | T. C. | | Payment Term: | | |
| Stock/ | | Description | Q | Quantity | Unit Cost | Amount |
| Property No. | Unit | | Q4 | Total | | |
| 33 | kit | Expanded Newborn Screening Test | 2,000 | 2,000 | 1,750.00 | 3,500,000.00 |
| | 1 | Note: \ | | | | |
| | | 1. All reagents must have a minimum of 3 months from delivery to expiry date. The supplier must provide a guarantee letter that they will pull out and replace items one month before expiry otherwise the item delivered must have a one year shelf life. The guarantee letter must state that they will pull out and replace items two weeks upon the procuring entity's notification. | | | | |
| | | | , | | | 3,500,000.00 |
| (Total Amou | nt in Words | s) THREE MILLION FIVE HUNDRED THOUSAND PESOS | ONLY | | | \ |
| Remarks: | For Dept. o | f Pathology and Laboratory (For Laboratory use only) | | | | |
| Reference: | | Distributorship for PR No.20-03-057 | | | | |
| In case of fa undelivered item | | e the full delivery within the time specified above, a penalty of one | -tenth (1/10 |)) of one percent f | or every day of dela | y shall be imposed on the |
| | | | | | | |
| Prepared by: Checked by: Reviewed by: Approved by: Approved by: Approved by: Approved by: MARJORINANNE D. MENA Chief Administrative Officer Conforme: | | | | | | |
| Signature or | ver Printed N Date | Name of Supplier | | | | |
| Fund Cluster : Funds Availabl | DI Reg | | ORS/BURS No.: 1000 - 02 - 1010 - 2020 - 09 - 22 Date of the ORS/BURS: 19 12 1020 | | | |
| 100000000000000000000000000000000000000 | | T. CORNEL MAKAGEM BALBOA rative Officer Accountant III | 2/2/ | Amount: | <u>3.5</u> | 00.000.00 |