



BATAAN GENERAL HOSPITAL AND MEDICAL CENTER
Balanga City, Bataan
ISO-QMS 9001 Certified



PURCHASE ORDER

Supplier :	ZAFIRE DISTRIBUTORS, INC.	P.O. No. :	20-10-940
Address :	# 49 Examiner St., West Triangle, Quezon City, Metro Manila	Date :	October 28, 2020
TIN :		Mode of Procurement :	Negotiated Procurement - EMERGENCY CASES

Gentlemen:

Please furnish this Office the following articles subject to the terms and conditions contained herein:

Place of Delivery : BGHMC PROPERTY AND SUPPLY SECTION

Delivery Term : 10 Calendar Days

Date of Delivery : _____

Payment Term : _____

Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
1	kit	HBsAg Assay Kit Product Code: CH617178, 100 test/kit	20	18,500.00	370,000.00
2	kit	Anti-HCV Assay Kit Code: AT622998 , 100 test/kit	20	20,800.00	416,000.00
		Consumables Good for 20 kits:			
		HBS Ag Calibrator UOM: C0-C5:1ml x 6 (No. of Sets: 1)			
		HCV AB Calibrator UOM: Ab NC:1ml x 1, Ab PC:1ml x 1 (No. of Sets: 1)			
		Viratrol for 3mx3x2 UOM: L1:3ml x 3, L2:3ml x 3 (No. of Sets: 1)			
		Substrate Reagent Set UOM: R4:40ml x 1, R5:70ml x 1 (Number of test: 600) x (no. of sets: 7)= (Total No. of Test: 4,200)			
		Washing Solution UOM: 10Lx1 (Number of test: 1,666) x (No. of sets: 3)=(Total no. of test: 4,998)			
		Line Washing Solution UOM: 10L x 1 (Number of Test:200) x (No. of sets:20)= (Total no. of test: 4,000)			
		Probe washing Solution 250ml x 2, UOM: 250ml x 2 (Number of Test: 1,000) x (No. of sets: 4)=(Total no. of test: 4,000)			
		Cuvette L UOM: 5000pcs/pack (Number of Test: 4,000) x (No. of Sets: 1)=(Total no. test: 4,000)			
		Disposal tip UOM: 5000pcs/pack (Number of Test: 4,000) x (No. of Sets: 1)=(Total no. test: 4,000)			
					786,000.00

(Total Amount in Words) SEVEN HUNDRED EIGHTY SIX THOUSAND PESOS ONLY

Note:

- The supplier must provide updated CPR
- All consumables needed for optimum operation of the machine must be listed in the bid proposal with its corresponding price (unlisted reagents/consumables will be considered free)
- Proof of Kit Evaluation from SACCL

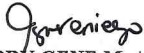
4. Reagents, controls, calibrators, consumables and disposables for HBsAg and HCV Ab Screening Test Compatible to HISCL 5000 Machine CHEMILUMNISCENCE ENZYME IMMUNOASSAY (CLEIA)/CHEMILUMNISCENCE IMMUNOASSAY (CLIA) must be provided.

Remarks: for DPL use (for HBsAg and HCV Ab Testing of Dialysis Patients)

Reference: Product Evaluation Report for PR No. 20-10-348

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed on the undelivered item/s.


Prepared by:


TERRY GENE M. ARENIEGO
Administrative Assistant II

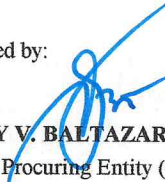
Checked by:


YOLANDA A. SORIAO-LANSANGAN
Procurement Head

Reviewed by:


MARJORIE ANNE D. MENA
OIC - Chief Administrative Officer

Approved by:


GLORY V. BALTAZAR, M.D., MPH, MHA, CEsE
Head of Procuring Entity (HOPE)

Conforme:

Signature over Printed Name of Supplier

Date

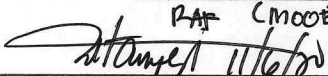
Fund Cluster : 01/REGULAR AGENCY FUND

Funds Available : RAF (HEPA)
RAF (MOOE)

ORS/BURS No. : MOOE-62-101101-2020-11-1618

Date of the ORS/BURS: 11-06-2020

Amount : 786,000.00


MARIA TERESA CORNEL
Supervising Administrative Officer


MARJORIE BALBOA
Accountant III

PRO-F-23-05