



PURCHASE ORDER

Supplier:	<u>MEDILINES DISTRIBUTORS, INC.</u>	P.O No.	<u>21227</u>
Address:	<u>No. 7 Pioneer Cor. Sheridan Street, Mandaluyong City</u>	Date:	<u>04/05/2022</u>
E-mail Add:	<u>jelaguardia@medilines.com.ph</u>	Mode of Procurement:	<u>PUBLIC BIDDING</u> March 3, 2022
Telephone.:	<u>09176568768</u>	PR No.:	<u>IB No. 2022-03-03 (05)</u>
TIN:	<u>219-075-614-000</u>	Abstract of Canvass No.:	_____

Gentlemen:
Please furnish this office the following articles subject to the terms and conditions contained herein.

Place of Delivery: CARAGA REGIONAL HOSPITAL Delivery Term: 30 CALENDAR DAYS
Date of Delivery: // Payment Term: _____

Item No.	DESCRIPTION	Quantity	Unit	Unit Cost	Amount
0000011936	BICARBONATE CARTRIDGE	1,500	CART	300.00	450,000.00
0000011939	HEMODIALYSIS BLOOD TUBING SET ACCESSORIES: PILLOW, TRANSDUCER PROTECTOR, IV SET NON-DEHP, NON-PYROGENIC, NON-TOXIC, KINK RESISTANT TUBING	1,500	SET	175.00	262,500.00
0000026010	ACID SOLUTION 5 LITERS (GALLON) CONCENTRATED HEMODIALYSIS SOLUTION	1,500	GALLON	250.00	375,000.00
0000026054	DIALYZER HIGH FLUX W/ A SURFACE AREA OF 1.9 SQ.M. AND WALL THICKNESS/OR INTERNAL DIAMETER OF 30 TO 40/200 MICROMETER	700	PIECE	1,298.00	908,600.00
0000026055	DIALYZER LOW FLUX W/ A SURFACE AREA OF 1.9 SQ.M. AND WALL THICKNESS/OR INTERNAL DIAMETER OF 30 TO 40/200 MICROMETER	700	PIECE	1,198.00	838,600.00
0000026186	COLD STERILANT FOR DIALYZER AT LEAST 5 LITERS/CANESTER	10	CANES TER	5,345.00	53,450.00
	OTHER TERMS AND CONDITIONS: Other Terms and conditions and specification shall be referred to the Technical and Eligibility and Financial Requirements being submitted by the supplier/contractor and to the Philippine Bidding Documents issued by the Procuring Entity.				

TOTAL >>> ₱ 2,888,150.00

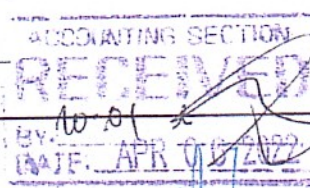
Total Amount in Words: TWO MILLION EIGHT HUNDRED EIGHTY EIGHT THOUSAND ONE HUNDRED FIFTY PESOS ONLY

Warranty (Section 62 of the Revised IRR of RA 9184): For the procurement of Goods, in order to assure that manufacturing defects shall be corrected by the supplier, a warranty security shall be required from the contrac awardee for a minimum period of three (3) months, in the case of Expendable Supplies, or a minimum period of one (1) year, in the case of Non-expendable Supplies, after acceptance by the Procuring Entity of the delivered supplies. The obligation for the warranty shall be covered by either retention money in an amount equivalent to atleast one (1%) of every progress payment, or a special bank guarantee equivalent to at least one percent (1%) of the total contract price. The said amounts shall only be released after the lapse of the warranty period, or, in the case of Expendable Supplies, after consumption thereof. Provided, however, That the supplies delivered are free from patent and latent defects, and all the conditions imposed under the contract have been fully met. Liquidated damages (Section 68 of the Revised IRR of RA 9184): The amount of the liquidated damages shall be at least equal to one-tenth of one percent (0.001) of the cost of the unperformed portion for every day of delay. This is without prejudice to the actual damages incurred by the agency.

Conformed: JOSE ERNESTO M. LAGUARDIA
(Signature over printed name)
APRIL 13, 2022
(Date)

Very truly yours,

CHERYL A. GOTINGA, MD, FPPS
Medical Center Chief I



Checked :
TRISTAN JOHSE D. ANDO
ADMINISTRATIVE OFFICER

Funds Available: BY: ANAMAE D. ALSONG, CPA
ACCOUNTANT IV

Fund Cluster:
ORS/BUS No.:
Date of the ORS/BURS:
CAA No.: 2022-01-0032
Amount: 2,888,150.00



Republic of the Philippines
Department of Health
CARAGA REGIONAL HOSPITAL
Surigao City

PRO-03
Rev. No. 0
Effectivity: 02/01/18

NOTICE TO PROCEED

April 13, 2022

The Manager
MEDILINES DISTRIBUTORS, INC.
Mandaluyong City

Sir / Madam:

This is to inform you that **Purchase Order No. 21227** dated **APRIL 5, 2022**, as a result of **PUBLIC BIDDING** has been approved. You may now proceed with the delivery of the items listed in the said Purchase Order.

Delivery should be completed as prescribed Delivery Schedule/Delivery Term stipulated in the approved Purchase Order.

Enclosed is the original copy of the above-named Purchase Order for your ready reference in the execution of the transaction.

Very truly yours,


CHERYL A. GOTINGA, MD, FPPS
Medical Center Chief I

I acknowledge receipt of this notice on : APRIL 18, 2022

Name of representative : JOSE ERNESTO LAGUARDIA

Authorized Signature : 