

Republic of the Philippines Department of Budget and Management PROCUREMENT SERVICE PHILIPPINE GOVERNMENT ELECTRONIC PROCUREMENT SYSTEM



NOTICE TO PROCEED

PO No. : PO19-00815-NCSE *

NOA No.: 2019-PSNOA241-BACNOA7-DOH

MR. VAN WILLIAM L. CO

OMNIBUS BIO-MEDICAL SYSTEMS, INC.

4th Floor, Wilson Corporate Center, 225 Wilson St.,
Greenhills, San Juan City ;

Dear Mr. Co:

The attached Contract Agreement having been approved, notice is hereby given to **OMNIBUS BIO-MEDICAL SYSTEMS, INC.** that performance for the **Supply and Delivery of Blood Bank Equipment** under **PB No. 19-042-7** opened on **March-13, 2019**, shall commence effective on the date of receipt of this Notice:

Lot No.	Item/Description	Qty/ Unit	Unit Price	Total Amount
3	Plasma Thawer	2 units	₽ 453,000.00·	₽ 906,000.00 ^
	<u> </u>		TOTAL AMOUNT:	₽ 906,000.00

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 Delivery Schedule.

Please acknowledge receipt of this notice by signing on the space provided below.

Very truly yours,

ELISA MAYJARBOLEDA-CUEVAS

Executive Director ()

Date of receipt of this Notice:

Name of Authorized Representative:

Signature of Authorized Representative:

Dec- 10,2019

DANCY CARMONA

DBM Compound, General Solano Street, San Miguel,

PS-DBM Complex Cristobal St., Paco Metro Manila Tel. Nos 563-93-61 689-7750 loc. 4020

CONTRACT/PURCHASE ORDER

No

				IVO. PU	19-WELD -NCSE
То:	OMNIBUS BIO-MEDICAL SYSTEMS, INC. 4th Floor Wilson Corporate Center 225 Wilson Street, Greenhills San Juan City Metro Manila Please deliver the article(s)/product(s)/supplies/materi			Date of PB:	No. <u>19.042.7</u> 03-13-2019 vith your Quotation
No		subjec	t_to_the_	Terms_and Condition	ons enumerated at
the ba	ack hereof:				
Item No.	ITEM and DESCRIPTION/SPECIFICATIONS/STOCK No.	QTY	UNIT	UNIT PRICE	AMOUNT
	PLASMA THAWER	2	unit	453,000.00	906,000.00
	Thawing Capacity: 8 bags Power Supply Input: 220-240 VAC, 60 Hz For complete and detailed specifications, please refer to the attached Technical Evaluation Report which form part of this Purchase Order.				
	Delivery shall conform with the minimum labeling requirements under RA 7394. The inspections and tests that will be conducted shall be in accordance with Section VII. Technical Specifications. A warranty covered by either retention money or special bank guaranty equivalent to at least 1% of the payment on the contract price shall be required for a period of one (1) year		•		
				TOTAL AMOUNT	vith your Quotation ons enumerated at AMOUNT 906,000.00 Calendar roceed (NTF)
	CE OF DELIVERY:	DELIVERY INSTRUCTIONS: Within One Hundred Twenty (120) Calendar Daysfrom the receipt of Notice to Proceed (NTP)			
FUNE	S AVAILABILITY CERTIFIED BY: LIAN RAUL M. CATALAN /// // // // // // // // // // // // /	AUTHORI ELISA M	W	OLEDA CUEVAS	P 906,000.00 Calendar occed (NTP) DATE
OMN	Purchase Order received and accepted subject to the TIBUS BIO-MEDICAL SYSTEMS, NAME-OF SUPPLIER Purchase Order received and accepted subject to the TIBUS BIO-MEDICAL SYSTEMS, NAME-OF SUPPLIER (SIGNATURE OVER PRIN	& HOWA	iditions enu		oof: DUE DATE

PS-DBM Complex Cristobal St., Paco Metro Manila Tel. Nos 563-93-61

689-7750 loc. 4020

COPY FOR: ACCOUNTING DIVISION

CONTRACT/PURCHASE ORDER

No. PO19-MA15-NCSE

				140, <u>F</u>	CAE 2-AMOUTO -: ACCORY
	OMNIBUS BIO-MEDICAL SYSTEMS, INC. 4th Floor Wilson Corporate Center 225 Wilson Street, Greenhills San Juan City Metro Manila Please deliver the article(s)/product(s)/supplies/materi			Reference: PUE BIDDIN Date of PB:	G No. <u>19-042-7</u> 03-13-2019 with your Quotation
1	ITEM and DESCRIPTION/SPECIFICATIONS/STOCK No.	QTY	UNIT	UNIT	AMOUNT
Item No.	FEM and DESCRIP HONGS LOW IOANONOG TOOM NO.	Q11	ONT	PRICE	
	after acceptance. Subject to Expanded Withholding Tax, Final Withholding Tax and Other Percentage Taxes Reference R.A. 9337, Revenue Regulation Nos. 16-05, 14-02, 12-01 & 2-98. The following document shall be deemed to form and be read and construed as part of this Purchase Order, viz: a)The Supplier's Bid including the Technical and Financial Proposals and other documents/statements submitted (e.g. bidder's response to clarifications on the bid), including corrections to the bid resulting from the Procuring Entity's bid evaluation; b)The Schedule of Requirements; c)The Technical Specifications; d)the General Conditions of the Contract; e)The Special Conditions of the Contract; f)The Performance Security; and g)The entity's Notice of Award.				
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				TOTAL AMOUNT	p 906,000.00
DI AGE OF DELIVEDV		DELIVERY	INSTRU	CTIONS:	
PLACE OF DELIVERY: Please see above instructions,		Within One Hundred Twenty (120) Calendar Daysfrom the receipt of Notice to Proceed (NTP)			
	DS AVAILABILITY CERTIFIED BY: LIAN RAUL M. CATALAN /// / / /	AUTHORI	ΧV	OLEDA-CUEVA	S
.	ACCOUNTANT DATE	1	DIREC	TOR 💅	DATE
OMI	AUTHODIZED DEBDES	PANAS AND COR	nditions enu	merated at the back h	DUE DATE
	NAME OF SUPPLIER (SIGNATURE OVER DEIX	TED NAME		> >	- ~ · · · · · · · · · · ·



PS-DBM Complex Cristobal St., Paco Metro Manila Tel. Nos 563-93-61

689-7750 loc. 4020

CONTR	ACT/	PURCH	IASE	ORDER
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No. PO19-00815-NCSE

То:	OMNIBUS BIO-MEDICAL SYSTEMS, INC. 4th Floor Wilson Corporate Center 225 Wilson Street, Greenhills	Date <u>November 07, 2019</u> Reference: PUBLIC BIDDING No. <u>19-042-7</u> Date of PB: <u>03-13-2019</u>				
	San Juan City Metro Maniia			Date of FB.	11341 342311 9	
	Please deliver the article(s)/product(s)/supplies/mater					
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Item No.	ITEM and DESCRIPTION/SPECIFICATIONS/STOCK No.	QTY	UNIT	UNIT PRICE	TNUOMA	
, , , , , , , , , , , , , , , , , , ,	PROJECT SITES: 1 unit - Ospital ng Palawan, Puerto Princesa City, Palawan 1 unit - Edwin Andrews Airbase Hospital, Zamboanga City					
on come to the	for the Department of Health (DOH)- NVBSP APR No 18-00355					
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	XX.				00.000.00	
	BSST -			TOTAL AMOUNT	906,000.00	Õ
	ACE OF DELIVERY:	DELIVERY INSTRUCTIONS:				
PI	case see above instructions,			indred Twenty (120) receipt of Notice to P		TINGE
	OSIAVAILABILITY CERTIFIED BY:	-AUTHOR		An		ACCOUNTING DIVISION
	LANRAUL M. CATALAN ///2/// / LACCOUNTANT / DATE		DIREC	OLEDA - CUEVAS	DATE	FOR: A
OM	Purchase Order received and accepted subject to the NIBUS BIO-MEDICAL SYSTEMS. INC. NAME OF SUPPLIER AUTHORIZED REPRESENTATION OF PRESENTATION OF PRESENTAT	#MONA Entative	nditions enu	merated at the back her Der - 10: John DATE RECEIVED	eof: DUE DATE	COPY
2010 P	SIGNATURE OVER PRIM	ITED NAME)		DIVID INCOMPLET	DOL DAIL	İ