

Republic of the Philippines

Department of Budget and Management

PROCUREMENT SERVICE --
PHILIPPINE GOVERNMENT ELECTRONIC PROCUREMENT SYSTEM

BIDS AND AWARDS COMMITTEE



NOTICE TO PROCEED

October 4, 2019

PO No. PO19-00664-NCSE NOA No. 2019-PSNOA-189-BACNOA3-DOH

MICHELLE LORAINE G. SANVICTORES ZUELLIG PHARMA CORP. — INTERPHIL LABORATORIES INC. (JV)

Km. 14 West Service Rd. SSH cor. Edison Ave.,

Brgy. Sun Valley, Parañague City

Tel. No.: (02) 908-2222

Email: MLGragasin@zuelligpharma.com

Dear Ms. Sanvictores:

The attached Purchase Order having been approved, notice is hereby given to **Zuellig Pharma Corp. – Interphil Laboratories Inc. (JV)** that performance on **Supply and Delivery of Progestin Only Pill (POP) for the Department of Health** for the following items under **PB 19-187-3** shall commence effective on the date of receipt of this Notice:

LOT NO.	ITEM/DESCRIPTION	QΤΥ	UNIT PRICE	AMOUNT	Ì
1	Progestin Only Pill (POP)	4,500,000 packs	P 40.00	P180,000,000.00	/

Upon receipt of this notice, you are responsible for performing the services under the terms and conditions provided in the Purchase Order and in accordance with the Delivery Schedule.

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

	Very truly yours,	
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		en e
X	ELISA MAY ARBOLEDA-CUEVAS	
· ·	Executive Director	,
	· · · · · · · · · · · · · · · · · · ·	
	Date of receipt of this Notice:	
	Date of receipt of this Notice.	
	Name of Authorized Representative:	

Ç	ONTRACT/PURCHASE ORDER			No. PO1	9-00664 -NCSE
To:	JV OF ZUELLIG PHARMA CORP. & INTERPH LABORATORIES INC. Km. 14 West Service Road, SSH corner, Edison Avenue, Brgy. Sun Valley, Parañaque City	L .		Date <u>October 0</u> Reference: PUBLI BIDDING Date of PB: <u>α</u>	C No. <u>PB#19-187-3</u>
No the b	Please deliver the article(s)/product(s)/supplies/materia	als listed be subject	elow pric	ed in accordance w Terms and Condition	ith your Quotation ons enumerated at
Item No.	ITEM and DESCRIPTION/SPECIFICATIONS/STOCK No.	QTY	UNIT	UNIT PRICE	AMOUNT
1	Progestin Only Pill (POP)	900,000	pack	40.00	36,000,000.00
2	Progestin Only Pill (POP)	900,000	pack	40.00	36,000,000.00
3	Progestin Only Pill (POP)	900,000 ,	pack	40.00	36,000,000.00
4	Progestin Only Pill (POP)	900,000	pack	40.00 /	36,000,000.00
	10-16-0664			TOTAL AMOUNT	₱ 180,000,000.00
P	lease refer to the Project Site listed		' . ' . 1	ICTIONS:	ons
	ALLAN RAUL M. CATALAN ACCOUNTANT W DATE	AUTHOR ELISA M	Á y ARE	BOLEDA - CUEVAS	DATE

Purchase Order received and accepted subject to the Terms and Conditions enumerated at the back hereof:

ZUELLIG PHARMA CORPORATION

NAME OF SUPPLIER

Michelle Loraine G. Sanvictores

AUTHORIZED REPRESENTATIVE (SIGNATURE OVER PRINTED NAME)

DATE RECEIVED

DUE DATE

COPY FOR: SUPPLIER



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

То:	JV OF ZUELLIG PHARMA CORP. & INTERPE LABORATORIES INC. Km. 14 West Service Road, SSH corner, Edison Avenue, Brgy. Sun Valley, Parañaque City	III.		Reference: P	ING No.	PB#19-187-3
No the b	Please deliver the article(s)/product(s)/supplies/mater XXX dated XXX pack hereof:				_	
Item No.	ITEM and DESCRIPTION/SPECIFICATIONS/STOCK No.	QTY	UNIT	UNIT PRICE		AMOUNT
5	Progestin Only Pill (POP)	900,000 4	pack	40	.00	36,000,000.00
	Please submit DR/Invoice & Copy of P.O. to the Inspection Division after direct delivery of this item.					
	Please submit Warranty Certificate, if applicable. As a precondition for payment, submit authenticated Import documents per DOF Order No. 87-91, if applicable.					
	A warranty security in the form of either retention money or special bank guarantee equivalent to at least 1% of the payment on the contract price shall be required for a period of three (3) months after acceptance.					
- - ,=	The following documents shall be deemed to form and be read and construed as part of this Purchase Order, viz:					
	10-16-0664		· · · · · · · · · · · · · · · · · · ·	TOTAL AMOUN	Τ ₽	180,000,000.00
Ple ab	ACE OF DELIVERY: ease refer to the Project Site listed ove		refer to t	CTIONS:	uctions	
-	LLAN RAUL M. CATALAN ACCOUNTANT M DATE	AUTHORI ELISA M	AY ARBO	OLEDA - CUEV	ÁS	DATE

Purchase Order received and accepted subject to the Terms and Conditions enumerated at the back hereof:

ZUELLIG PHARMA CORPORATION

ACCOUNTANT

NAME OF SUPPLIER

Michelle Loraine G. Sanvictores /

AUTHORIZED REPRESENTATIVE (SIGNATURE OVER PRINTED NAME)

DÁTE

DATE RECEIVED

DIRECTOR

DUE DATE

DATE

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

689-7750 loc. 4020

CONTRACT/PURCHASE ORDER

PO19-00664-NCSE No.

т	JV OF ZUELLIG PHARMA	CORP. &	INTERPHIL
10:	LABORATORIES INC.	3	•

Km. 14 West Service Road, SSH corner, Edison Avenue, Brgy. Sun Valley, Parañaque City

NAME OF SUPPLIER

Date_	October 04, 2019	
Refere	nce: PUBLIC	

BIDDING No. PB#19-187-3 07/09/2019 Date of PB:____

	-XXX- ack hereof:	dated	—-XXX-	subje	ect to the	Terms and Condit	ions e	numerated a
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	a)the Supplier's Bid, inclu							
	Financial Proposals, and a							
	statements submitted (e.g.	bidder's response	to					
	clarifications on the bid), i	including correctio	ns to	.			1	
	the bid resulting from the	Procuring Entity's	bid		- 1			
	evaluation;	•						
1 -	b)the Schedule of Require					1		
	c)the Technical Specificati							
	d)the General Conditions	of Contract;						·
	e)the Special Conditions of							
	f)the Performance Security	y; and						
	g)the Entity's Notice of A	ward						
	Th. 11		<i>y</i>					
	Delivery Instructions:		<u> </u>		n visi mulau in			**
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	Within One Hundred Twe effective date indicated	mry (120) Calenda	г ряўз пош					
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А	LLAN RAUL M. CATALA	ALN I	1121/19	TELISA		BOLEDA - CUEVAS		
À		4.7	DATE	1	0101	CTOR 😭		DATE

AUTHORIZED REPRESENTATIVE (SIGNATURE OVER PRINTED NAME)

DUE DATE

DATE RECEIVED

Republic of the Philippines **DEPARTMENT OF BUDGET AND MANAGEMENT**PROCUREMENT SERVICE - PhilGEPS

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

CONTRACT/PURCHASE ORDER

No. PO19-00664 -NCSE

To:	JV OF ZUELLIG PHARMA	CORP. &	INTERPHIL
10.	LABORATORIES INC.	* * *	•

Km. 14 West Service Road, SSH corner, Edison Avenue, Brgy. Sun Valley, Parañague City

NAME OF SUPPLIER

Date	October 04, 2019
Referer	ice: PUBLIC

BIDDING No. <u>PB#19-187-3</u>

Date of PB: 07/09/2019

	Please deliver the article(s)/product(s)/supplies/materi	ials listed h	elow prid	ced in accordance v	vith your Ouotation
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ne b	pack hereof:				
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	- 4,500,000 pacas		* * *		·
		7	. :		No. of the
	The Project Site is:			y de l	•
	- Department of Health warehouses and Service Providers in			general de la Paris	"
	Metro Manila but not limited to the following:		÷		<i>1</i> .
	Quirino Memorial Medical Center, JP Rizal St., Project 4 Quezon City		*		4 · *
	2. DOH Logistic Management Division, San Lazaro Cmpd.				
	Sta. Cruz, Manila				w v
	3. Non-Pharell Warehouse, Temperature Control, Sun Valley, Parañaque				
	4. Veterans, Taguig City (Non-Aircon)	2.7.		· · · · · · · · · · · · · · · · · · ·	
	5. Ximex Warehouse, Tanyag, Taguig			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	. · · · · · · · · · · · · · · · · · · ·
			*		
	Contact Person:				
	Dr. Ariel Valencia Director IV - Supply Chain Management Office				
	Discours 14 - Supply Chain Wallagement Office				
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	10.16.077			<u> </u>	100,000,000
	10-16-0664			TOTAL AMOUNT	₽ 180,000,000.0
PL	ACE OF DELIVERY:	DELIVERY	′INSTRU	CTIONS:	
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abo	ase refer to the Project Site listed	Please	refer to the	he Delivery Instructio	ns
	DS AVAILABILITY CERTIFIED BY:	AUTHORI	760 PW		15-21
~.1	100 000				
ΔΊ	LLAN RAUL M. CATALAN 11/21/19	ACT ICA NA	AZ ADDO	OLEDA - CUEVAS	
		J ELION W		TOR COLVAS	
~~	ACCOUNTANT H		טואב(NOK CS	DATE

AUTHORIZED REPRESENTATIVE (SIGNATURE OVER PRINTED NAME)

DATE RECEIVED

COPY FOR: SUPPLIER

DUE DATE

Republic of the Philippines **DEPARTMENT OF BUDGET AND MANAGEMENT** PROCUREMENT SERVICE - PhilGEPS

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

NAME OF SUPPLIER

JV OF ZUELLIG LABORATORIES Km. 14 West Service Edison Avenue, Brgy Parañaque City	Road, SSH corner,	& INTERPH	L	.	Oate October 0- Reference: PUBL BIDDING Date of PB: 0	C No. <u>PB#19-187-3</u>
	article(s)/product(s)					
m ITEM and DESCRI	PTION/SPECIFICATIONS	S/STOCK No.	QTY	UNIT	UNIT PRICE	AMOUNT
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For the Department of Reference: PS-APR N			t u Ne			
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10-16-066	4 ;· · · · · · ·			Т	OTAL AMOUNT	₱ 180,000,000.00
PLACE OF DELIVERY:				/ INSTRUC		
Please refer to the Project above UNDS AVAILABILITY CERTIFIED ALLAN RAUL M. CAT ACCOUNTANT	FIED BY:	11/21/19	AUTHOR!	ZEDBAL	e Delivery Instruction LEDA - CUEVAS	ons

DATE RECEIVED

DUE DATE

AUTHORIZED REPRESENTATIVE (SIGNATURE OVER PRINTED NAME)