



# National Center for Mental Health

## NOTICE OF AWARD

February 20, 2024

### **I-SENZ MEDICAL, INC.**

Unit H 15/F 8 Adriatico Tower 1,  
P. Faura St. Cor. J. Bocobo St., Ermita Manila  
Tel. No.: 09177131339  
Email Address: salvemacalinao.isenz@gmail.com

Sir / Madam:

Please be advised that based on the results of the **Public Bidding** conducted by the National Center for Mental Health for the **Supply and Delivery of Drugs and Medicines (Service Patients) CY 2024**, the following item(s) are hereby awarded to your company:

| ITEM CODE           | QTY | UNIT   | ITEM/SPECIFICATIONS   | UNIT PRICE | TOTAL PRICE        |
|---------------------|-----|--------|---|------------|--------------------|
| DM-095              | 120 | BOTTLE | Sodium Hyaluronate Eye Drops 0.1%, 5ml<br>Brand: IVISC<br>Origin: Korea | ₱ 250.00   | ₱ 30,000.00        |
| <b>TOTAL AMOUNT</b> |     |        |   |            | <b>₱ 30,000.00</b> |

You are hereby required to submit the following **within ten (10) calendar days**:

- **Notarized Contract Agreement Form (Legal Size)** for the Public Bidding for the **Supply and Delivery of Drugs and Medicines (Service Patients) CY 2024**

*NOTE: The signatory shall be NOEL V. REYES, MD, FPPA, MMHoA, MEDICAL CENTER CHIEF II; and*

- Notarized Performance Securing Declaration; **or**
- Performance Security in any forms and amount stipulated below:

|   |  |
|---|--|
| A. Cash or Cashier's / Manager's Check Bank Guarantee   | Five Percent (5%) of the Total Contract Price    |
| B. Surety Bond callable upon demand issued by a surety or insurance company duly certified by Insurance Commission / GSIS | Thirty Percent (30%) of the Total Contract Price |

*"There is no Health without Mental Health"*



- LABELLING:

For each box, bottle, and corrugated carton, the following should be legibility imprint:

**"Philippine Government Property  
Department of Health  
NOT FOR SALE"**

*Failure to provide any of the above-mentioned requirements shall constitute sufficient grounds for cancellation of this Award and forfeiture of the Bid Security.*

Truly yours,



**NOEL V. REYES, MD, FPPA, MMH<sub>o</sub>A**

Medical Center Chief II 



**CONFORME:**

  
JONLEX ARONUEVO  
Name and Signature (Authorized Representative)

2-28-24  
Date and Time