

REPUBLIC OF THE PHILIPPINES Department Of Health





NOTICE OF AWARD

February 20, 2024

ONICARE PHARMA TRADING & GENERAL MDSE.

Blk 8, Lot 36, Villa Consolacion Subd., San Jose, Antipolo City

Tel No.: +63 587-3118; +63 9324249818

Email: cayabyabella@gmail.com onicarepharma@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-027	100	BOTTLE	Ofloxacin Eye Drops 0.3% , 5 ml Brand: OFLOBIZ Origin: Philippines	₱ 190.00	₱ 19,000.00
DM-028	100	BOTTLE	Ofloxacin Ear Drop Solution 0.3%,5 ml bottle Brand: OFLOBIZ Origin: Philippines	215.00	21,500.00
DM-029	150	TUBE	Silver Sulfadiazine 1%, 25 g cream Brand: BURNSIL Origin: Bangladesh	100.00	15,000.00
DM-066	1,000	CAPSULE	Fluconazole 150mg Brand: FLUCONABAS Origin: Pakistan	48.00	48,000.00
DM-101	800	AMPULE	Tetanus Toxoid 0.5ml ampule Brand: IMATET Origin: Pakistan	76.00	60,800.00
		t	Т	OTAL AMOUNT	₱ 164,300.00

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

"There is no Health without Mental Health"





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

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

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, MMHoA

Medical Center Chief II 🧌

CONFORME:

Name and Signature (Authorized Representative)

2 28 2024

Date and Time