



# National Center for Mental Health

## NOTICE OF AWARD

February 20, 2024

### **OXFORD DISTRIBUTIONS, INC.**

Suite 1408 East Tower, Philippines Stock Exchange,  
Exchange Road, Ortigas Center, Pasig City  
Tel No.: 0917-8546532 / 0939-9125594  
Email: lberlamino@oxford.ph; kasgov1@oxford.ph

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-006	20,000	TABLET	Cefuroxime 500 mg (as axetil) Brand: SUNCETIN 500 500mg FC tab, 30's Origin: India	₱ 8.50	₱ 170,000.00
DM-092	2,000	TABLET	Finasteride 5 mg Brand: VEXFIN 5 5mg FC tab, 30's Origin: India	6.75	13,500.00
DM-120	2,000	TABLET	Aripiprazole 10 mg ODT Brand: ARPIVEX 10 10mg Orally Disintegrating Tab, 30's Origin: India	90.00	180,000.00
DM-132	15,400	TABLET	Escitalopram 10 mg Brand: ESCIVEX 10 10mg FC tab, 30's Origin: India	4.20	64,680.00
<b>TOTAL AMOUNT</b>					<b>₱ 428,180.00</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:

*"There is no Health without Mental Health"*



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

- 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:

  
**JOCVELYN PAROMAGUERRA**  
 Key Accounts Specialist

\_\_\_\_\_  
 Name and Signature (Authorized Representative)

**2/28/24**

\_\_\_\_\_  
 Date and Time