## REPUBLIC OF THE PHILIPPINES Department Of Health

WICA



## National Center for Mental Health

## **NOTICE OF AWARD**

February 12, 2024

## **VARIANCE TRADING CORPORATION**

AGG-CT II Bldg. V Luna Road Corner Matapat Street, Brgy. Pinyahan, District 4 Quezon City

Tel No.: 983-4616 / 983-1973

Email: customer.service@variancetradingcorporation.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 MEDICAL SUPPLIES CY 2024**, the following items are hereby awarded to your company:

NO.	QTY	UNIT	ITEM/SPECIFICATIONS	UNIT PRICE	TOTAL PRICE
MS24- 205	10	piece	Guedel oral airway, size 1 - Color-coded for easy identification. Smooth finish and rounded edges. Reinforced bite block helps prevent occlusion. Full range of sizes and convenient packaging options. Emergency kit available with a clear plastic case. Brand: Bicakcilar Country of Origin: Turkey	25.00	250.00
MS24- 207	10	piece	Guedel oral airway, size 3 - Color-coded for easy identification. Smooth finish and rounded edges. Reinforced bite block helps prevent occlusion. Full range of sizes and convenient packaging options. Emergency kit available with a clear plastic case. Brand: Bicakcilar Country of Origin: Turkey	25.00	250.00
MS24- 210	20	pīece	Guedel oral airway, size 6 - Color-coded for easy identification. Smooth finish and rounded edges. Reinforced bite block helps prevent occlusion. Full range of sizes and convenient packaging options. Emergency kit available with a clear plastic case Brand: Bicakcilar Country of Origin: Turkey	25.00	500.00
	TOTAL AMOUNT			₱1,000.00	

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 MEDICAL SUPPLIES 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 Bank Guarantee	Five Percent (5%) of the Total Contract Price
В.	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

NOTE: <u>Failure to provide any of the aforementioned requirements within ten (10) calendar days shall</u> 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:

Authorized Representative (Name & Signature)

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Date and Time