

## REPUBLIC OF THE PHILIPPINES Department Of Health



## National Center for Mental Health

## **NOTICE OF AWARD**

March 1, 2024

## MEDASIA MEDICAL PRODUCTS CORPORATION

Rm. 412, Web-Jet Bldg., #64 Quezon Ave., Quezon City

Tel No.: +632 8742-9591; 0999-8811986

Email: marissa@medasia.com.ph

malyn@medasia.com.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 MEDICAL SUPPLIES CY 2024**, the following items are hereby awarded to your company:

NO.	QTY	UNIT	ITEM/SPECIFICATIONS	UNIT PRICE	TOTAL PRICE
MS24- 100	1,500	Piece	Nasogastric tube (NGT) Duodenal tube, Fr. 16, 100% Silicone, individually pack, sterilized (with at least 24 months expiration). Country of origin: China	138.00	207,000.00
MS24- 101	200	Piece	Nasogastric tube (NGT) Duodenal tube, Fr. 14, 100% Silicone, individually pack, sterilized (with at least 24 months expiration). Country of origin: China	138.00	27,600.00
	TOTAL AMOUNT				<b>₱ 2</b> 34,600.00

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

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

Α.	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	Thirty Percent (30%) of the Total Contract Price
	certified by Insurance Commission / GSIS	

"There is no Health without Mental Health"







NOTE: Failure to provide any of the aforementioned requirements within ten (10) calendar days 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

CONFORM

Authorized Jepresentative (Name & Signature)

Date and Time