REPUBLIC OF THE PHILIPPINES Department of Health

NATIONAL CENTER FOR MENTAL HEALTH



NOTICE OF AWARD

March 10, 2025

SOUTH EAST STAR ENTERPRISES

Zone 5, Barangay Natatas, Tanauan, Batangas

Tel No.: 043-778-5599;

+63 975-1925924

Email: cristinaarce1589@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 MEDICAL SUPPLIES CY 2025 (EARLY PROCUREMENT ACTIVITY), the following items are hereby awarded to your company:

NO.	TTEM CODE	QTY	UNIT	ITEM/SPECIFICATIONS	UNIT PRICE	TOTAL PRICE
THE RES	MS25- 139	14,450	piece	Vented Macro-Infusion Set, 185cm ADULT with Anti Run Dry and Auto Prime with smartsite needle free system and pinch clamp. (with at least 24 months expiration). Country of origin: Malaysia	138.00	1,994,100.00
	TOTAL AMOUNT P1,994.100.00					

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 2025 (EARLY PROCUREMENT ACTIVITY)

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

Performance Security in any forms and amount stipulated below:

A.	Cash or Cashier's / Manager's Check issued by a Universal of Commercial Bank.	
В.	Bank draft/guarantee or irrevocable letter of credit issued by a Universal or Commercial Bank: Provided, however, That it shall be confirmed or authenticated by a Universal or Commercial Bank, if issued by a foreign bank.	Five Percent (5%) of the Total Contract Price







C. Surety bond callable upon demand issued by a surety or insurance company duly certified by the Insurance Commission as authorized to issue such security. Thirty Percent (30%) of the Total Contract Price

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 🙀 🔥

CONFORME:

Authorized Representative (Name & Signature)

Date and Time