

NOTICE OF AWARD

March 10, 2025

VMED MEDICAL COMPANY

1331 Dagupan St., Tondo, Manila Tel No.: 8254-0018; 7006-5131 Email: vmedcompany@gmail.com arlenesamoy@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 item/s are hereby awarded to your company:

NO.	ITEM CODE	QTY	UNIT	ITEM/SPECIFICATIONS	UNIT PRICE	TOTAL PRICE
1	MS25- 98	315	piece	Pulse Oximeter, fingertip, SPO2 and pulse rate (PR) display, PR waveform and bargraph display, built in alarm can be set to high and low, adjustable auto alarm range, simple operation, low power consumption, four directions and at least six (6) display modes, color OLED, automatic power off, with USB rechargeable cord, with Certificate of Calibration. Provide 1 (ONE) year warranty certificate from the date of delivery, inspection and acceptance. Brand: Prohealth Care Country of origin: China	878.00	276,570.00
	TOTAL AMOUNT			MOUNT	P 276,570.00	

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:

Α.	Cash or Cashier's / Manager's Check issued by a Universal of Commercial Bank.	Five Percent (5%) of the Total Contract Price

Trunkline: 8531-9001 Website: www.ncmh.gov.pH









В.	Bank draft/guarantee or irrevocable letter of	Five Percent (5%) of the Total
	credit issued by a Universal or Commercial Bank: Provided, however, That it shall be	Contract Price
	confirmed or authenticated by a Universal or	
	Commercial Bank, if issued by a foreign bank.	
C.	Surety bond callable upon demand issued by a	Thirty Percent (30%) of the Total
	surety or insurance company duly certified by the	Contract Price
]	Insurance Commission as authorized to issue such	
	security.	
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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