



NOTICE OF AWARD

January 16, 2025

NEW MIDES ENTERPRISES, INC.

#226 Ma. Clara Street, 11th Avenue Grace Park, Caloocan City

Tel No.: 8361-5417 Fax No.: 8366-7564; 0975-0817436

Email: newmides@yahoo.com

carlotasantos143@yahoo.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 Linen Supplies CY 2025 (Line Item) (Early Procurement Activity), the following items are hereby awarded to your company:

NO.	ITEM CODE	QTY	UNIT	ITEM/SPECIFICATIONS	UNIT PRICE	TOTAL PRICE
1	LS25- 15	700	piece	PILLOW, hypoallergenic, washable, plain white, 16"x 26". Not less than 500 grams, vacuum packed Offer: 18"x28" Country of Origin: Philippines Brand: No Brand	₱ 180.00	₱ 126,000.00
	TOTAL AMOUNT					₱ 126,000.00

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 LINEN SUPPLIES CY 2025 (LINE ITEM) (EARLY PROCUREMENT ACTIVITY)

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

Performance Security in any forms and amount stipulated below:

A. Cash or Cashier's / Manager's Check issued by a Universal of Commercial Bank.	Five Percent (5%) of the Total Contract Price
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"There is no Health without Mental Health"

9 De Pebrero St., Brgy. Mauway, Mandaluyong City Trunkline: 8531-9001 Website: www.ncmh.gov.pH









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: <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)

Date and Time