



NOTICE OF AWARD

January 16, 2025

VITAL SPARK HEALTHCARE SOLUTIONS, INC.

5 Finance Street, 207 Victoria Village, Brgy. Bahay Toro
Project 8, Quezon City 1106
Tel. No.: 0917-8325958
Email: liza.gapac@vitalsparkshs.com
randy.fonte@vitalsparkshs.com

Sir / Madam:

Please be advised that a Negotiated Procurement – **Direct Contracting** is used by the National Center for Mental Health – Bids and Awards Committee of Goods for the **Supply and Delivery of Radiology Supplies (Disposable Syringe Kit) CY 2025 (Early Procurement Activity)** and is hereby **awarded** to your company the following item(s):

ITEM NO.	QTY	UOM	ITEM DESCRIPTION	UNIT PRICE	TOTAL COST
1	20	box	100 ml Disposable Syringe Kit (100ml Syringe, 1.5m coiled patient tubing & spike), 50pcs/box, Ref:A81100-11523 with RF Tag, (at least 2 years expiry) compatible for APOLLO RT INJECTOR MODEL APO100 Aport Medical 100ml Disposable Syringe Kit (100ml Syringe, 1.5m Coiled patient tubing & spike) 50 kits/box Ref#A81100-11523	₱ 52,800.00	₱ 1,056,000.00
TOTAL AMOUNT:					₱ 1,056,000.00

You are hereby required to submit the following **within ten (10) calendar days**:

- Performance Security in any forms and amount stipulated below:

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

"There is no Health without Mental Health"

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.

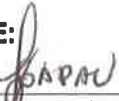
Thirty Percent (30%) of the Total Contract Price

NOTE: Failure to provide any of the aforementioned requirements within ten (10) calendar days shall constitute sufficient grounds for cancellation of this Award.

Truly yours,


NOEL V. REYES, MD, FPPA, MMHoA
Medical Center Chief II  

CONFORME:


LIZA SAPAU
Authorized Representative (Name & Signature)

1/27/2025
Date and Time