

## REPUBLIC OF THE PHILIPPINES Department Of Health



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## National Center for Mental Health

## **NOTICE OF AWARD**

February 17, 2023

## ZAFIRE DISTRIBUTORS, INC.

No. 49 Examiner St., West Triangle, Quezon City Tel. No.: (63) 969-4769476 / 09985861415

Tel. No.: (63) 969-4769476 / 09985861415 (632) 411 0500 / 925 0500

Email Address: gillragual.medgistixcorp@gmail.com rose.altobar.medgistixcorp@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 2023**, the following item/s is hereby awarded to your company:

NO.	ITEM DESCRIPTION	ITEM CODE	QTY	UOM	UNIT PRICE	TOTAL PRICE
1	Polypropylene monofilament, non absorbable, size 2/0, 75 cm, cutting needle, 1/2 circle / 3/8 circle, 26mm - 37mm (with at least 24 months expiration).  Country of origin: USA Brand: Covidien surgipro* 2-0 BLU 75 cm C15 x 36  CFN# SP-685  Covidien/Medtronic	MS-170	24	piece	PHP 300.00	PHP 7,200.00
2	Polypropylene monofilament, non absorbable, size 3/0, 75cm-90cm, round needle, 1/2 circle, 37mm / 26mm (with at least 24 months expiration). Country of origin: USA Brand: Covidien Surgipro II 3-0 Blu 90 cm V20DA CFN# VP-552-X Covidien/Medtronic	MS-173	24	piece	280.00	6,720.00
3	Polypropylene monofilament, non absorbable, size 4/0, 75cm-90cm, round needle, 1/2 circle, 17mm(with at least 24 months expiration).  Country of origin: USA Brand: Covidien Surgipro II 4-0 Blu 90 cm CV23DA CFN# CP-557-X Covidien/Medtronic	MS-175	24	piece	250.00	6,000.00
		PHP 19,920.00				

"There is no Health without Mental Health"







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 2023

**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:

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

NOTE: Failure to provide any of the above-mentioned 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

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CONFORME:

Authorized Representativ

Date and Time