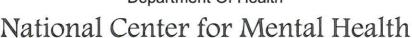


## REPUBLIC OF THE PHILIPPINES Department Of Health







## **NOTICE OF AWARD**

January 06, 2023

## **ZUELLIG PHARMA CORPORATION**

KM 14 West Service Road, South Superhighway, Corner Edison Avenue, Brgy. Sun Valley, Paranaque City Tel. No.: (02) 7908-2222; 0998-9617551 Email Address: moclares@zuelligpharma.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 Radiology 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	Non Ionic Intravenous Iodinated Contrast Agent (300mg/ml)(100ml) Generic name: Iohexol; Low Osmolar; FDA Approved; Listed in Philippine National Formulary; 2 years expiry; Being used in at least 2 tertiary public/private hospitals with certificate of no serious adverse reaction  Non Ionic Intravenous Iodinated Contrast Agent (300mg/ml)(100ml) Generic name: Iohexol; Low Osmolar Brand Name: Omnipaque 647 mg/ml (equivalent to 300mg iodine solution for injection) 100ml 10's	RS23 – 07	250	bottle	PHP 1,820.20	455,050.00
		PHP 455,050.00				

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

 Contract Agreement Form (Legal Size) for the Public Bidding for the Supply and Delivery of Radiology Supplies CY 2023

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

"There is no Health without Mental Health"





- Notarized Performance Securing Declaration; or
- Performance Security in any forms and amount stipulated below:

Α.	Cash or Cashier's / Manager's Check	Five Percent (5%) of the Total Contract Price		
	Bank Guarantee			
В.	Surety Bond callable upon demand	Thirty Percent (30%) of the Total Contract		
	issued by a surety or insurance	Price		
	company duly certified by Insurance			
	Commission / GSIS			

Failure to provide any of the above-mentioned requirements 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

Date and Time