



Republic of the Philippines
Department of Health
FAR NORTH LUZON GENERAL HOSPITAL AND TRAINING CENTER



Quirino, Luna, Apayao
ISO 9001:2015 Certified
Certificate No. AJA15.0870



NOTICE OF AWARD

February 11, 2021

DOMINIC CAFUGAUAN
MEDIX DEPOT
R&J Bldg. Centro 12
Balzain Highway, Tuguegarao City

Dear Sir/Ma'am:

We are happy to notify you that your Bid dated February 9, 2021 for the **SUPPLY & DELIVERY OF LABORATORY SUPPLIES** for the contract price of equivalent to **FIVE HUNDRED NINETY FIVE THOUSAND SEVEN HUNDRED THIRTY THREE PESOS & SIXTY CENTAVOS (PhP595,733.60)** as corrected and modified in accordance with the Instructions to Bidders is hereby accepted.

QTY	UNIT	DESCRIPTION		AMOUNT
1	box	Cytocolor-Merck-500 ml	14,410.00	14,410.00
20	box	Blood Lancet feather	817.00	16,340.00
2	pack	Vacutainer tube-Blue Top	520.00	1,040.00
2	pack	westergreen tube-ESR	1,792.00	3,584.00
5	box	Dengue Ns1Ag	8,640.00	43,200.00
5	box	Dengue IgG/IgM	6,016.00	30,080.00
3	box	HCV-Rapid	13,000.00	39,000.00
5	box	RPR-Rapid SD	4,992.00	24,960.00
2	box	hiv rapid	8,710.00	17,420.00
6	box	Malaria-Rapid SD	3,250.00	19,500.00
2	box	HAV antibody	5,850.00	11,700.00
10	pack	Yellow tips	297.00	2,970.00
100	box	Hemoglucostrip	800.00	80,000.00
1	bot	Lugol's Iodine	925.60	925.60
5	boxes	Pregnancy Test Pack	1,040.00	5,200.00
30	bots	Urine Reagent Strip	364.00	10,920.00
30	box	Pedia urine collector	299.00	8,970.00
250	bots	Aerobic Culture bottle for ADULT	455.00	113,750.00
300	bots	Aerobic Culture bottle (FN) for PEDIA	455.00	136,500.00
12	pc	Cotton-400g	162.00	1,944.00
12	box	Micropore 1 inch	500.00	6,000.00
60	bot	Alcohol	70.00	4,200.00
30	box	Face Mask	104.00	3,120.00

TWINNIE JOY SALLES
02/11/21 : 10:48 AM



TOTAL	595,733.60
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You are hereby required to provide within ten (10) days the performance security in the form and the amount stipulated in the Instructions to Bidders. Failure to provide the performance security shall constitute sufficient ground for cancellation of the award and forfeiture of the bid security.

Very truly yours,


MARLENE L. DUBO, MD, FPPS, MHA
 Medical Center Chief

Conforme:

NAME: _____
 SIGNATURE: _____
 DATE: _____