

CONTRACT AGREEMENT

This AGREEMENT made this 23rd day of February 2024 between the **PROVINCIAL GOVERNMENT OF PANGASINAN**, of the Philippines (hereinafter called the "Procuring Entity") of the one part and **NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP** (hereinafter called the "Contractor/Supplier") of the other part;

WHEREAS, the Entity is desirous that the Contractor execute the **Supply and Delivery of Various Laboratory Reagents/Supplies at Provincial Governor's Office, Lingayen, Pangasinan (for use of Western Pangasinan District Hospital, Umingan Community Hospital, Mapandan Community Hospital, Lingayen District Hospital, Eastern Pangasinan District Hospital and Bolinao Community Hospital); Trust Fund; PR No. 2024-01-0039; Solicitation No. PANG-2024-01-0055-G,** and the Entity has accepted the Bid for **Eight Million, Two Hundred Thirty-Three Thousand, Seven Hundred Forty-Eight Pesos and 60/100 Only (P8,233,748.60)** by the Contractor for the execution and completion of such Works and to remedy any defects therein.

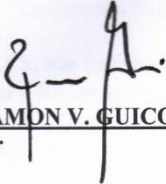
NOW, THIS AGREEMENT WITNESSETH AS FOLLOWS:

1. In this Agreement words and expressions shall have the same meanings as are respectively assigned to them in the Conditions of Contract referred to.
2. The following documents as required by the 2016 revised Implementing Rules and Regulations of Republic Act No. 9184 shall be deemed to form and be read and construed as integral part of this Agreement, viz.:
 - i. Philippine Bidding Documents (PBDs);
 - i. Schedule of Requirements;
 - ii. Technical Specifications;
 - iii. General and Special Conditions of Contract; and
 - iv. Supplemental or Bid Bulletins, if any
 - ii. Winning bidder's bid, including the Eligibility requirements, Technical and Financial Proposals, and all other documents or statements submitted.

Bid form, including all the documents/statements contained in the Bidder's bidding envelopes, as annexes, and all other documents submitted (e.g., Bidder's response to request for clarifications on the bid), including corrections to the bid, if any, resulting from the Procuring Entity's bid evaluation.
 - iii. Performance Security;
 - iv. Notice of Award of Contract; and the Bidder's conformer thereto; and
 - v. Other contract documents that may be required by the existing laws and/or the Procuring Entity concerned in the PBD's. **Winning bidder agrees that the additional contract documents or information prescribed by the contract execution, such as the Notice to Proceed, Variation Orders, and warranty Security, shall likewise form part of the Contract.**
3. In consideration for the sum of **Eight Million, Two Hundred Thirty-Three Thousand, Seven Hundred Forty-Eight Pesos and 60/100 Only (P8,233,748.60)** or such other sums as may be ascertained, **NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP** agrees to the **Supply and Delivery of Various Laboratory Reagents/Supplies at Provincial Governor's Office, Lingayen, Pangasinan (for use of Western Pangasinan District Hospital, Umingan Community Hospital, Mapandan Community Hospital, Lingayen District Hospital, Eastern Pangasinan District Hospital and Bolinao Community Hospital); Trust Fund; PR No. 2024-01-0039; Solicitation No. PANG-2024-01-0055-G**, in accordance with his/her/its Bid.

4. The **PROVINCIAL GOVERNMENT OF PANGASINAN** agrees to pay the above-mentioned sum in accordance with the terms of the Bidding.

IN WITNESS whereof the parties thereto have caused this Agreement to be executed in the day and year first above written.


HON. RAMON V. GUICO III
Governor


MS. JIANNA MIKHAELA P. LOPEZ
Authorized Representative

For:
**PROVINCIAL GOVERNMENT
OF PANGASINAN**

For:
**NORTHCARE PHARMACEUTICAL
DISTRIBUTORSHIP**

ACKNOWLEDGEMENT

Republic of the Philippines)
Province of Pangasinan) S.S.
Municipality of _____)

BEFORE ME, a Notary Public, for and in _____, Pangasinan, Philippines, personally appeared the following with their respective proof of identity on FEB 23 2024, 2024
2-23-24

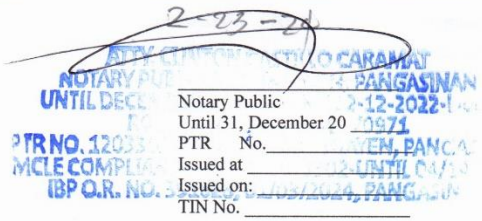
HON. RAMON V. GUICO III Proof of Identity : TIN
(Governor) Licensed No, : 159-902-046-00000
Date Issued : September 8, 2019

MS. JIANNA MIKHAELA P. LOPEZ Proof of Identity :
(Contractor) Date Issued :
Expiry date :

Known to me and to me known to be the same person who executed and signed the foregoing instrument and who acknowledged to me that the same are their true and voluntary acts and deeds and that of the agency/entity they respectively represent.

This instrument is a **CONTRACT AGREEMENT** for the **Supply and Delivery of Various Laboratory Reagents/Supplies at Provincial Governor's Office, Lingayen, Pangasinan (for use of Western Pangasinan District Hospital, Umingan Community Hospital, Mapandan Community Hospital, Lingayen District Hospital, Eastern Pangasinan District Hospital and Bolinao Community Hospital); Trust Fund; PR No. 2024-01-0039; Solicitation No. PANG-2024-01-0055-G**, consisting of Two (2) pages including this page where the acknowledgement is written. Pages One and Two are signed on the corresponding spaces provided thereof by the Parties and their instrumental witnesses and sealed with my notarial seal.

WITNESS MY HAND AND SEAL this _____ day of FEB 23 2024, _____, in _____, Pangasinan.


Notary Public
Until 31, December 20 2024
PTR No. 12033
Issued at _____
IBP O.R. No. _____
TIN No. _____

Doc. No. 209
Page No. 06
Book No. X



Republic of the Philippines
PROVINCE OF PANGASINAN
Office of the Governor
2F Capitol Compound, Lingayen, Pangasinan

Hon. Ramon V. Guico III, DPM
Governor

NOTICE OF AWARD

22 February 2024

MS. JIANNA MIKHAELA P. LOPEZ
Authorized Representative
NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP
15 Camanang Roadside,
Urdaneta City, Pangasinan

Dear Ms. Lopez:

We are happy to notify you that your bid dated February 15, 2024, for **Supply and Delivery of Various Laboratory Reagents/Supplies at Provincial Governor's Office, Lingayen, Pangasinan (for use of Western Pangasinan District Hospital, Umingan Community Hospital, Mapandan Community Hospital, Lingayen District Hospital, Eastern Pangasinan District Hospital and Bolinao Community Hospital); Trust Fund; PR No. 2024-01-0039; Solicitation No. PANG-2024-01-0055-G**, is hereby awarded to you as the Bidder with Lowest Calculated and Responsive Bid at a contract price equivalent to **Eight Million, Two Hundred Thirty-Three Thousand, Seven Hundred Forty-Eight Pesos and 60/100 Only (P8,233,748.60)**.

You are hereby required to provide within ten (10) days the performance security in the form and the amount stipulated in the Instruction 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,


HON. RAMON V. GUICO III

Conforme: JIANNA MIKHAELA P. LOPEZ
Date 2-22-24



Republic of the Philippines
PROVINCE OF PANGASINAN
Office of the Governor
2F Capitol Compound, Lingayen, Pangasinan

Hon. Ramon V. Guico III, DPM
Governor

NOTICE TO PROCEED

26 February 2024

MS. JIANNA MIKHAELA P. LOPEZ
Authorized Representative
NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP
15 Camanang Roadside,
Urdaneta City, Pangasinan

Dear Ms. Lopez:

The attached Contract Agreement having been approved, notice is hereby given to **NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP** that the work may commence on the **Supply and Delivery of Various Laboratory Reagents/Supplies at Provincial Governor's Office, Lingayen, Pangasinan (for use of Western Pangasinan District Hospital, Umingan Community Hospital, Mapandan Community Hospital, Lingayen District Hospital, Eastern Pangasinan District Hospital and Bolinao Community Hospital); Trust Fund; PR No. 2024-01-0039; Solicitation No. PANG-2024-01-0055-G**, effective within seven (7) calendar days after the receipt of this notice.

Upon receipt of this notice, you are responsible for performing the services under the terms and conditions of the Agreement and in accordance with the Implementing Schedule.

Please acknowledge receipt and acceptance of this notice by signing both copies in the space provided below. Keep one and return the other to the **Provincial Government of Pangasinan**.

Very truly yours,

HON. RAMON V. GUICO III

I acknowledge receipt of this Notice on : 2-24-24
Name of the Representative of the Bidder : JIANNA MIKHAELA P. LOPEZ
Authorized Signature :

PURCHASE ORDER
PROVINCE OF PANGASINAN

LGU

2-23-24

Supplier : <u>NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP</u>	P.O. No. : <u>00133</u>
Address : <u>URDANETA CITY, PANGASINAN</u>	Date: <u>23 FEB 2024</u>
TIN : <u>293-548-871-00000</u>	Mode of Procurement: <u>2024-01-0039</u>
	PR No./s

Gentlemen:

Please furnish this Office the following articles subject to the terms and conditions contained herein:

w/in 7 C.D. upon receipt of NTP

Place of Delivery : <u>Provincial Governor's Office, Lingayen, Pangasinan</u>	Delivery Term : <u>Cheque</u>
Date of Delivery : _____	Payment Term: _____


Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
1	BOTS	Abnormal Control	5	6,540.00	32,700.00
2	BOTS	Abnormal Control (Chemistry)	3	9,480.00	28,440.00
3	BOX	Alanine Aminotransferase Kit (ALT-IFCC Method)	1	11,735.00	11,735.00
4	BOTS	Alcohol 70% (500 ml)	60	108.00	6,480.00
5	BOX	ALT	3	9,500.00	28,500.00
6	BOX	ALT reagent	1	9,622.00	9,622.00
7	SET	Anti D	5	3,500.00	17,500.00
8	BOTS	Applicator Stick	5	765.00	3,825.00
9	BOX	Applicator Stick (Wooden)	10	765.00	7,650.00
10	BOX	Applicator stick 100's	2	403.00	806.00
11	BOX	Aspartate Aminotransferase Kit (AST-IFCC Method)	1	11,735.00	11,735.00
12	BOTS	AST	3	9,500.00	28,500.00
13	BOX	AST reagent	1	9,257.00	9,257.00

PAGE 1

(Total Amount in Words)

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed on the undelivered item/s

Conforme:


 HON. MICHAELA P. LOPEZ

Signature over Printed Name of Supplier

Very truly yours,


 HON. RAMON V. GUICO III

Signature over Printed Name of Authorized Official

Governor

Designation

Date

(In case of Negotiated Purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished.)

Approved per Sanggunian Resolution No.: _____

Certified Correct:

Secretary to the Sanggunian

Date

PURCHASE ORDER
PROVINCE OF PANGASINAN
 LGU

Supplier : <u>NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP</u>	P.O. No. : <u>00133</u>
Address : <u>URDANETA CITY, PANGASINAN</u>	Date: <u>23 FEB 2024</u>
TIN : <u>293-548-871-00000</u>	Mode of Procurement: <u>competitive bidding</u>
	PR No./s <u>2024-01-0039</u>

Gentlemen:

Please furnish this Office the following articles subject to the terms and conditions contained herein:

Place of Delivery : <u>Provincial Governor's Office, Lingayen, Pangasinan</u>	Delivery Term : <u>w/in 7 C.D. upon receipt of NIP</u>
Date of Delivery : _____	Payment Term: <u>Cheque</u>

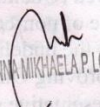
Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
14	SET	BLOOD LANCET	25	1,085.00	27,125.00
15	BOX	Blood lancet 200's	10	1,085.00	10,850.00
16	PCS	Blood lancet device	5	1,075.00	5,375.00
17	SET	BUA	3	13,950.00	41,850.00
18	SET	BUA reagent	1	13,950.00	13,950.00
19	SET	BUN	3	13,950.00	41,850.00
20	SET	BUN	3	13,950.00	41,850.00
21	BOTS	CD80 Detergent	3	16,000.00	48,000.00
22	BOTS	CD80 detergent 2L	6	9,178.00	55,068.00
23	BOX	CF Lyse	2	26,550.00	53,100.00
24	BOX	Cholesterol Reagent	3	9,489.00	28,467.00
25	SET	Cholesterol reagent	2	9,489.00	18,978.00
26	SET	Control 1 & 2	2	3,325.00	6,650.00

(Total Amount in Words)

PAGE 2

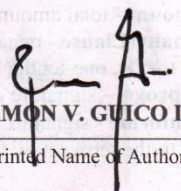
In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed on the undelivered item/s

Conforme:


 JANNINA MIKHAELE P. LOPEZ

Signature over Printed Name of Supplier

Very truly yours,


 HON. RAMON V. GUICO III

Signature over Printed Name of Authorized Official

Governor

Designation

(In case of Negotiated Purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished.)

Approved per Sanggunian Resolution No.: _____

Certified Correct:

Secretary to the Sanggunian

Date

PURCHASE ORDER
PROVINCE OF PANGASINAN
LGU

Supplier : <u>NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP</u>	P.O. No. : <u>00133</u>
Address : <u>URDANETA CITY, PANGASINAN</u>	Date: <u>competitive bidding</u>
TIN : <u>293-548-871-00000</u>	Mode of Procurement: <u>23 FEB 2024</u>
	PR No./s <u>2024-01-0039</u>

Gentlement:

Please furnish this Office the following articles subject to the terms and conditions contained herein:

Place of Delivery : <u>Provincial Governor's Office, Lingayen, Pangasinan</u>	Delivery Term : <u>w/in 7 C.D. upon receipt of NTP</u>
Date of Delivery : _____	Payment Term: <u>Cheque</u>

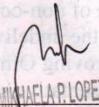
Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
27	ROLL	Cotton (400g)	10	256.50	2,565.00
28	SET	Creatinine	3	13,775.00	41,325.00
29	BOX	Creatinine Kit (Sarcosine-Oxidase Method)	1	13,775.00	13,775.00
30	BOX	Creatinine Reagent	5	13,775.00	68,875.00
31	SET	Creatinine reagent	2	13,775.00	27,550.00
32	LTRS	Deionized water	1	874.00	874.00
33	BOX	DENGUE DUO (Lumiquick) 40's	20	19,350.00	387,000.00
34	BOTS	Diff Lyse	2	28,490.00	56,980.00
35	BOTS	DIFF Lyse	12	28,490.00	341,880.00
36	BOTS	Diff Lyse M52	4	28,490.00	113,960.00
37	BOX	DILUENT	13	33,080.00	430,040.00
38	BOX	Diluent 20L M52	2	10,487.00	20,974.00
39	BOX	Diluent 5P	12	33,000.00	396,000.00

(Total Amount in Words)

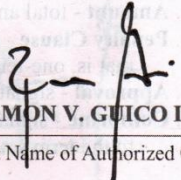
PAGE 3

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed on the undelivered item/s

Conforme:


Signature over HANNA MIKHAELA P. LOPEZ
Printed Name of Supplier

Very truly yours,


Signature over HON. RAMON V. GUICO III
Printed Name of Authorized Official

2-23-24
Date

Governor
Designation

(In case of Negotiated Purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished.)

Approved per Sanggunian Resolution No.:

Certified Correct:

Secretary to the Sanggunian

Date

PURCHASE ORDER
PROVINCE OF PANGASINAN

LGU

Supplier : <u>NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP</u>	P.O. No. : <u>00133</u>
Address : <u>URDANETA CITY, PANGASINAN</u>	Date: <u>23 FEB 2024</u>
TIN : <u>293-548-871-00000</u>	Mode of Procurement: <u>competitive bidding</u>
	PR No./s <u>2024-01-0039</u>

Gentlemen:

Please furnish this Office the following articles subject to the terms and conditions contained herein:

Place of Delivery : <u>Provincial Governor's Office, Lingayen, Pangasinan</u>	Delivery Term : <u>w/in 7 C.D. upon receipt of NTP</u>
Date of Delivery : _____	Payment Term: <u>Cheque</u>

Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
40	LTRS	Distilled Water (8lit) wilkins or Absolute	35	102.12	3,574.20
41	LTRS	Distilled Water/Deionized (Absolute)	30	102.12	3,063.60
42	BOX	EDTA (2 ML)	10	1,269.00	12,690.00
43	BOX	EDTA Microtainer Tube (0.5 ml)	10	2,070.00	20,700.00
44	PACK	EDTA TUBE 2ml	60	1,269.00	76,140.00
45	PACK	EDTA Tubes	20	3,370.00	67,400.00
46	PACK	Evacuated tube (Red top)	20	3,370.00	67,400.00
47	PACK	Evacuated tube (Yellow top)	30	3,500.00	105,000.00
48	PACK	Evacuated tube EDTA	50	1,269.00	63,450.00
49	BOX	Examination Gloves (Large)	10	672.00	6,720.00
50	BOX	Examination Gloves (Medium)	10	672.00	6,720.00
51	BOX	Glass slides	10	620.00	6,200.00
52	BOX	Glucose Kit (GOD-POD Method)	1	14,850.00	14,850.00

(Total Amount in Words)

PAGE 4

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed on the undelivered item/s

Conforme:

Wanna Michaela P. Lopez
Signature over Printed Name of Supplier

Signature over Printed Name of Supplier

Very truly yours,

Hon. Ramon V. Guico III
Signature over Printed Name of Authorized Official

Signature over Printed Name of Authorized Official

Governor

Designation

(In case of Negotiated Purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished.)

Approved per Sanggunian Resolution No.:

Certified Correct:

Secretary to the Sanggunian

Date

PURCHASE ORDER
PROVINCE OF PANGASINAN
LGU

Supplier : <u>NORTH CARE PHARMACEUTICAL DISTRIBUTORSHIP</u>	P.O. No. : <u>00193</u>
Address : <u>URDANETA CITY, PANGASINAN</u>	Date: <u>23 FEB 2024</u>
TIN : <u>293-548-871-00000</u>	Mode of Procurement: <u>competitive bidding</u>
	PR No./s <u>2024-01-0039</u>

Gentlemen:

Please furnish this Office the following articles subject to the terms and conditions contained herein:

Place of Delivery : <u>Provincial Governor's Office, Lingayen, Pangasinan</u>	Delivery Term : <u>w/in 7 C.D. upon receipt of NTP</u>
Date of Delivery : _____	Payment Term: <u>Cheque</u>

Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
53	BOX	Glucose Reagent	3	15,500.00	46,500.00
54	SET	Glucose Reagent	3	15,500.00	46,500.00
55	SET	Glucose reagent	2	15,500.00	31,000.00
56	BOX	Glucose Strip (CERA-CHECK)	50	2,890.00	144,500.00
57	BOX	Glucose Strips (SD Check - Gold)	30	3,500.00	105,000.00
58	SET	Gram's stain	1	12,800.00	12,800.00
59	BOX	HBsAG (Lumiquick) 40's	30	7,932.00	237,960.00
60	BOX	HDL - C Reagents	5	17,630.00	88,150.00
61	SET	HDL Cholesterol	3	17,630.00	52,890.00
62	BOTS	HDL Cholesterol Kit (Direct Method)	1	15,930.00	15,930.00
63	SET	HDL-C reagent	2	17,630.00	35,260.00
64	SET	HEMA CONTROL	1	20,700.00	20,700.00
65	BOTS	HEMA REAGENT 1	13	10,160.00	132,080.00

(Total Amount in Words)

PAGE 5

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed on the undelivered item/s

Conforme:

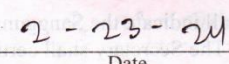

 JIANNA MICHAELA P. LOPEZ

Signature over Printed Name of Supplier

Very truly yours,


 HON. RAMON V. GUICO III

Signature over Printed Name of Authorized Official


 2 - 23 - 24

Date

Governor

Designation

(In case of Negotiated Purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished.)

Approved per Sanggunian Resolution No.:

Certified Correct:

Secretary to the Sanggunian

Date

PURCHASE ORDER
PROVINCE OF PANGASINAN

LGU

00133

Supplier : <u>NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP</u>	P.O. No. : _____
Address : <u>URDANETA CITY, PANGASINAN</u>	Date: <u>competitive Bidding 28 FEB 2024</u>
TIN : <u>293-548-871-00000</u>	Mode of Procurement: <u>2024-01-0039</u>
	PR No./s _____

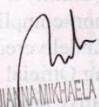
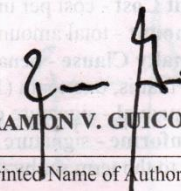
Gentlemen:
Please furnish this Office the following articles subject to the terms and conditions contained herein:
w/in 7 C.D. upon receipt of NTP

Place of Delivery : <u>Provincial Governor's Office, Ungayen, Pangasinan</u>	Delivery Term : <u>Cheque</u>
Date of Delivery : _____	Payment Term: _____

Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
66	BOTS	HEMA REAGENT 2	13	6,573.00	85,449.00
67	SET	Hematology Control	1	20,700.00	20,700.00
68	PCS	Hematology Control	1	20,700.00	20,700.00
69	SET	Hematology Control	1	20,700.00	20,700.00
70	LTRS	KOH	1	2,250.00	2,250.00
71	BOTS	LH Lyse	6	28,490.00	170,940.00
72	BOTS	LH Lyse	20	28,490.00	569,800.00
73	BOTS	LH Lyse M52	4	28,490.00	113,960.00
74	BOTS	Lipid Calibrator	3	27,000.00	81,000.00
75	LTRS	Lugol's Solution	1	5,109.00	5,109.00
76	SET	M30 Control	1	22,860.00	22,860.00
77	BOX	M30 DILUENT	8	33,080.00	264,640.00
78	BOX	M30 Diluent	3	33,080.00	99,240.00

(Total Amount in Words) PAGE 6

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed on the undelivered item/s

Conforme:  Signature over Printed Name of Supplier _____ Date <u>2-23-24</u>	Very truly yours,  HON. RAMON V. GUICO III Signature over Printed Name of Authorized Official _____ Governor Designation
---	---

(In case of Negotiated Purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished.)

Approved per Sanggunian Resolution No.: _____

Certified Correct: _____
 Secretary to the Sanggunian Date

PURCHASE ORDER
PROVINCE OF PANGASINAN
 LGU

Supplier : <u>NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP</u>	P.O. No. : <u>00133</u>
Address : <u>URDANETA CITY, PANGASINAN</u>	Date: <u>23 FEB 2024</u>
TIN : <u>293-548-871-00000</u>	Mode of Procurement: <u>competitive bidding</u>
	PR No./s <u>2024-01-0039</u>

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Place of Delivery : <u>Provincial Governor's Office, Lingayen, Pangasinan</u>	Delivery Term : <u>w/in 7 C.D. upon receipt of NTP</u>
Date of Delivery : _____	Payment Term: <u>Cheque</u>

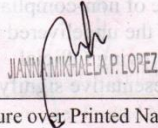
Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
79	BOTS	M30 LYSE	8	28,490.00	227,920.00
80	BOTS	M30 RINSE	8	26,550.00	212,400.00
81	BOX	M52 Diluent	3	33,080.00	99,240.00
82	BOX	Micropore 3M	10	675.00	6,750.00
83	PACK	Microtainer - Violet Top	30	1,210.00	36,300.00
84	PACK	Microtainer - Yellow Top	30	3,150.00	94,500.00
85	PACK	Microtainer (Red top) 100's	10	3,500.00	35,000.00
86	PACK	Microtainer (Violet top) 100's	30	2,100.00	63,000.00
87	BOX	Mindray M30 Diluent	5	33,080.00	165,400.00
88	BOTS	Mindray M30 Lyse	5	28,490.00	142,450.00
89	BOTS	Mindray M30 Rinse	5	26,550.00	132,750.00
90	PACK	Mini Collect Violet 0.5ml	40	1,210.00	48,400.00
91	PCS	Minicollect	3000	35.00	105,000.00

(Total Amount in Words)

PAGE 7

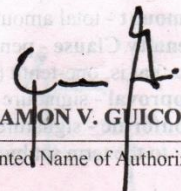
In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed on the undelivered item/s

Conforme:


 JANNI MICHAELA P. LOPEZ

Signature over Printed Name of Supplier

Very truly yours,


 HON. RAMON V. GUICO III

Signature over Printed Name of Authorized Official

Governor

Designation

2-23-24
 Date

(In case of Negotiated Purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished.)

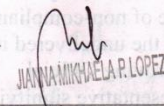
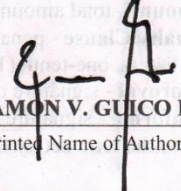
Approved per Sanggunian Resolution No.:

Certified Correct:

Secretary to the Sanggunian

Date

PURCHASE ORDER
PROVINCE OF PANGASINAN
LGU

Supplier : <u>NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP</u>		P.O. No. : <u>00133</u>			
Address : <u>URDANETA CITY, PANGASINAN</u>		Date: <u>23 FEB 2024</u>			
TIN : <u>293-548-871-00000</u>		Mode of Procurement: <u>competitive bidding</u>			
		PR No./s <u>2024-01-0039</u>			
Gentlemen: Please furnish this Office the following articles subject to the terms and conditions contained herein:					
Place of Delivery : <u>Provincial Governor's Office, Lingayen, Pangasinan</u>		Delivery Term : <u>w/in 7 C.D. upon receipt of NTP</u>			
Date of Delivery : _____		Payment Term: <u>Cheque</u>			
Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
92	BOTS	Multi Calibrator	3	27,000.00	81,000.00
93	BOTS	Multi Calibrator	3	27,000.00	81,000.00
94	SET	Multicalibrator	2	27,000.00	54,000.00
95	BOTS	Normal Control	5	6,540.00	32,700.00
96	BOTS	Normal Control (Chemistry)	3	7,954.00	23,862.00
97	LTRS	Normal Saline Solution	1	941.00	941.00
98	BOTS	NSS	1	436.80	436.80
99	BOX	Occult blood Card 100's	2	16,133.00	32,266.00
100	BOX	Pregnancy Test (Lumiquick) 40's	8	1,076.00	8,608.00
101	BOTS	PROBE CLEANSER	8	11,050.00	88,400.00
102	BOTS	PROBE CLEANSER	4	11,050.00	44,200.00
103	BOTS	Probe Cleanser	2	11,050.00	22,100.00
104	PACK	Red Top Tube	1	3,370.00	3,370.00
(Total Amount in Words)		PAGE 8			
In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed on the undelivered item/s					
Conforme: 		Very truly yours, 			
Signature over Printed Name of Supplier		Signature over Printed Name of Authorized Official			
<u>2-23-24</u> Date		Governor Designation			
(In case of Negotiated Purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished.)					
Approved per Sanggunian Resolution No.: _____					
Certified Correct: _____					
Secretary to the Sanggunian			Date		

PURCHASE ORDER
PROVINCE OF PANGASINAN
LGU

00133

Supplier : <u>NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP</u>	P.O. No. : _____
Address : <u>URDANETA CITY, PANGASINAN</u>	Date: <u>23 FEB 2024</u>
TIN : <u>293-548-871-00000</u>	Mode of Procurement: <u>competitive bidding</u>
	PR No./s <u>2024-01-0039</u>

Gentlemen:

Please furnish this Office the following articles subject to the terms and conditions contained herein:

Place of Delivery : <u>Provincial Governor's Office, Lingayen, Pangasinan</u>	Delivery Term : <u>w/in 7 C.D. upon receipt of NTP</u>
Date of Delivery : _____	Payment Term: <u>Cheque</u>

Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
105	PCS	Red tube 3ml	100	35.00	3,500.00
106	BOTS	Rinse	2	26,550.00	53,100.00
107	BOX	RPR (Lumiquick) 40's	20	8,201.00	164,020.00
108	PACK	Sealer Clay	1	315.00	315.00
109	SET	SGOT	3	9,500.00	28,500.00
110	SET	SGPT	3	9,500.00	28,500.00
111	PCS	Specimen Cups	1000	10.00	10,000.00
112	SET	Spill kit (complete accessories)	1	9,750.00	9,750.00
113	BOX	Syringe 1cc Terumo	30	1,790.00	53,700.00
114	BOX	Syringe 3cc Terumo	30	1,790.00	53,700.00
115	BOX	Syringe 5cc Terumo	30	1,890.00	56,700.00
116	PCS	Test tube brush (medium size)	10	135.00	1,350.00
117	PCS	Thermal Roll	48	161.00	7,728.00

(Total Amount in Words)

PAGE 9

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed on the undelivered item/s

Conforme:

JANINA MIKHELA P. LOPEZ

Signature over Printed Name of Supplier

Very truly yours,

HON. RAMON V. GUICO III

Signature over Printed Name of Authorized Official

Governor

Designation

(In case of Negotiated Purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished.)

Approved per Sanggunian Resolution No.:

Certified Correct:

Secretary to the Sanggunian

Date

**PURCHASE ORDER
PROVINCE OF PANGASINAN**

LGU

Supplier : <u>NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP</u> Address : <u>URDANETA CITY, PANGASINAN</u> TIN : <u>293-548-871-00000</u>	P.O. No. : _____ Date: <u>00133</u> Mode of Procurement: <u>competitive bidding</u> PR No./s: <u>2024-01-0039</u> 23 FEB 2024
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Gentlemen:
Please furnish this Office the following articles subject to the terms and conditions contained herein:
w/in 7 C.D. upon receipt of NTP

Place of Delivery : <u>Provincial Governor's Office, Lingayen, Pangasinan</u>	Delivery Term : <u>Cheque</u>
Date of Delivery : _____	Payment Term : _____

Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
118	SET	Total Cholesterol	3	15,930.00	47,790.00
119	BOX	Total Cholesterol Kit (CHOD-POD Method)	1	15,930.00	15,930.00
120	BOTS	Triglyceride Kit (GPO-POD Method)	1	14,700.00	14,700.00
121	BOX	Triglyceride Reagent	3	14,700.00	44,100.00
122	SET	Triglyceride reagent	2	14,700.00	29,400.00
123	SET	Triglycerides	3	14,700.00	44,100.00
124	BOX	TROPONIN I (Lumiquick) 40's	4	24,100.00	96,400.00
125	SET	Typing Sera	5	3,500.00	17,500.00
126	BOX	Urea Kit (Urease- GLDH, UV Method)	1	14,850.00	14,850.00
127	BOX	Urea reagent	5	7,821.00	39,105.00
128	BOX	Uric Acid Kit (Urease-Peroxidase Method)	1	14,850.00	14,850.00
129	BOX	Uric Acide	3	7,800.00	23,400.00
130	BOTS	Urine Strips 4P	30	1,800.00	54,000.00

(Total Amount in Words) PAGE 10

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed on the undelivered item/s

Conforme: _____ Signature over, Printed Name of Supplier <u>MANUEL MICHAELO P. LOPEZ</u> _____ Date: <u>2-23-24</u>	Very truly yours, _____ Signature over Printed Name of Authorized Official HON. RAMON V. GUICO III _____ Governor _____ Designation
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(In case of Negotiated Purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished.)

Approved per Sanggunian Resolution No.: _____

Certified Correct:

_____ Secretary to the Sanggunian	_____ Date
--------------------------------------	---------------

PURCHASE ORDER
PROVINCE OF PANGASINAN
LGU

Supplier : <u>NORTHCARE PHARMACEUTICAL DISTRIBUTORSHIP</u> Address : <u>URDANETA CITY, PANGASINAN</u> TIN : <u>293-548-871-00000</u>	P.O. No. : _____ Date: _____ Mode of Procurement: <u>competitive bidding</u> PR No./s <u>2024-01-0039</u>
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Gentlemen:

Please furnish this Office the following articles subject to the terms and conditions contained herein:

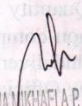
Place of Delivery : <u>Provincial Governor's Office, Lingayen, Pangasinan</u>	Delivery Term : <u>w/in 7 C.D. upon receipt of NTP</u>
Date of Delivery : _____	Payment Term : <u>Cheque</u>

Stock/ Property No.	Unit	Description	Quantity	Unit Cost	Amount
131	BOX	Yellow Tap Gel & Clot Activator (4 ml)	15	2,000.00	30,000.00
132	PACK	Yellow Tips	2	3,790.00	7,580.00
133	PACK	Yellow Top Tube	10	3,150.00	31,500.00
134	PCS	Yellow Tubes 3mL	100	35.00	3,500.00
XXXXX - XXXXX					

(Total Amount in Words) Eight Million Two Hundred Thirty-Three Thousand Seven Hundred Forty-
Eight Pesos and 60/100 Only **P 8,233,748.60**

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed on the undelivered item/s

Conforme:


 HANNIA MICHAELA P. LOPEZ

Signature over Printed Name of Supplier

Very truly yours,


 HON. RAMON V. GUICO III

Signature over Printed Name of Authorized Official

Governor

Designation

(In case of Negotiated Purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished.)

Approved per Sanggunian Resolution No.: _____

Certified Correct:

Secretary to the Sanggunian

Date