



Award Notice Abstract (Ref No.: 4766847)

Status: Updated

| <p>Reference Number: 10537505</p> <p>Control Number: 2024-01-037</p> <p>Bid Notice Title: Supply and Delivery of Medical and Dental Supplies for University Health Center Use (FIDUCIARY/P.R. No. 2024-01-037)</p> <p>Approved Budget: Php103,185.37</p> <p>Procurement Mode: Negotiated Procurement - Small Value Procurement (Sec. 53.9)</p> <p>Classification: Goods</p> <p>Category: Medical and Dental Equipment</p> <p>Applicable Procurement Rules: Implementing Rules and Regulations</p> <p>Funding Source: Government of the Philippines (GOP)</p> <p>Funding Instrument: Corporate Budget for the Contract Approved by the Board</p> <p>Area of Delivery: Samar</p> <p>Delivery Period: 20 Day/s</p> <p>Contact Person: Jessamae Caparas</p> <p>Created By: Jessamae Caparas</p> | <p align="center">NORTHWEST SAMAR STATE UNIVERSITY Rueda Extension Calbayog City Samar, Region VIII, Philippines S&D of Medical and Dental Supplies for Univ. (037)</p> <p>Awardee : INNOCARE PHARMA AND MEDICAL SUPPLIES TRADING</p> <p>Address : 281 Real St., Tacloban City Leyte, Region VIII, Philippines</p> <p>Contact Person : Charito Astillero Alejandre</p> <p>Designation : Operations Manager</p> <p>Reason for Award : Lowest Quotation.</p> | <p>Award Type: Award Notice</p> <p>Contract Amount: Php18,540.00</p> <p>Award Date: 19-Mar-2024</p> <p>Publish Date: 01-Apr-2024</p> <p>Date Last Updated: 01-Apr-2024</p> <p>Contract Number: 2024-03-088</p> <p>Proceed Date: 21-Mar-2024</p> <p>Contract Effectivity Date: 21-Mar-2024</p> <p>Contract End Date: 10-Apr-2024</p> <p>Created By: Jessamae Rondina Caparas</p> <p>Date Created: 01-Apr-2024</p> <p>Approver: Jessamae Rondina Caparas</p> <p>View Documents: 5</p> | | | | | | | | | |
|---|---|--|-----------|--|--|---|------------------------------|--------|---|--|--------------|
| <table border="1"> <thead> <tr> <th align="left" colspan="3">Line Item</th> </tr> <tr> <th align="left">#</th> <th align="left">Product/Service/Project Name</th> <th align="left">Budget</th> </tr> </thead> <tbody> <tr> <td align="center">1</td> <td>S&D of Medical and Dental Supplies for Univ. (037), 6 bot PNSS (for irrigation), 1L/bot.; 1 unit Weighing Scale w/ height, superior accuracy, heavy duty solid, stable platform..., with warranty (please see attached sample picture) (please see attached Purchase Order), 42152200, 1, Lump Sum</td> <td align="right">Php36,020.00</td> </tr> </tbody> </table> | | | Line Item | | | # | Product/Service/Project Name | Budget | 1 | S&D of Medical and Dental Supplies for Univ. (037), 6 bot PNSS (for irrigation), 1L/bot.; 1 unit Weighing Scale w/ height, superior accuracy, heavy duty solid, stable platform..., with warranty (please see attached sample picture) (please see attached Purchase Order), 42152200, 1, Lump Sum | Php36,020.00 |
| Line Item | | | | | | | | | | | |
| # | Product/Service/Project Name | Budget | | | | | | | | | |
| 1 | S&D of Medical and Dental Supplies for Univ. (037), 6 bot PNSS (for irrigation), 1L/bot.; 1 unit Weighing Scale w/ height, superior accuracy, heavy duty solid, stable platform..., with warranty (please see attached sample picture) (please see attached Purchase Order), 42152200, 1, Lump Sum | Php36,020.00 | | | | | | | | | |



Republic of the Philippines
NORTHWEST SAMAR STATE UNIVERSITY

Rueda St., Calbayog City, 6710

Website: <http://www.nwssu.edu.ph> Email: main@nwssu.edu.ph

Telefax: (055)2093657



PROCUREMENT OFFICE

Email: procurement@nwssu.edu.ph

TELEFAX: PDD1 - (055) 2093122

PURCHASE ORDER

| | |
|---|------------------------------------|
| Supplier: INNOCARE PHARMA & MEDICAL SUPPLIES TRADING | P. O. No. <u>2024-01-088</u> |
| Address: <u>#281, Pericolon Real St., Brgy. 56, Tacloban City</u> | Date Prepared: <u>19 Mar-24</u> |
| TIN: <u>941-580-929-000</u> | P.R. No. <u>2024-01-037</u> |
| | Mode of Procurement: <u>MP 519</u> |

Itemization: This is a **CONTRACT**, please turn to this Office the following articles subject to the terms and conditions contained attached herein. "Not varying from this Contract." All disputes shall be the appropriate trial courts in the City of Calbayog, to the exclusion of all other courts."

Date of Delivery: Supply Office, NwSSU Main Campus, Calbayog City Delivery Term: 20 cd
 Date of Delivery: Commence upon receipt of Purchase Order Payment Term: _____

| Stock Property No. Item No. | Unit | Description | Quantity | Unit Cost | Amount |
|---|------|---|----------|-----------|-----------|
| - | bot | PNSS (for irrigation), 1L/bot | 6 | 90.00 | 540.00 |
| 17 | unit | Weighing Scale w/ height, superior accuracy, heavy duty solid, stable platform, height rod measure 76-198 cm., dual reading die cast, long-lasting durable steel construction, with warranty <i>(please see attached sample picture)</i> | 1 | 18,000.00 | 18,000.00 |
| Total Amount In Words: <u>Eighteen Thousand Five Hundred Forty Pesos Only</u> | | | | | 18,540.00 |

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 undelivered items and/or other possible sanctions be imposed. No delivery within the contract duration, the University has the right to cancel the PO.

Conform: _____

INNOCARE PHARMA & MEDICAL SUPPLIES TRADING
 Signature Over Printed Name of Supplier

3-21-24
 Date

Very truly yours,

BENJAMIN L. PECAYO, Ed. D.
 University President

Fund Cluster: Fiduciary
 Funds Available: _____
CORNELIO C. BAUTISTA JR.
 Signature Over Printed Name of Chief Accountant - Head of Accounting Division Unit

ORS/BURS No.: _____
 Date of the ORS/BURS: _____
 Amount: _____



PROCUREMENT OFFICE

Email ad: procurement@nwssu.edu.ph

TELEFAX: PLDT - (055) 2093122

PURCHASE ORDER

| | | | |
|-----------|--|----------------------|--------------------|
| Supplier: | INNOCARE PHARMA & MEDICAL SUPPLIES TRADING | P. O. No.: | 2024-03-088 |
| Address: | #281, Pericolon Real St., Brgy. 56, Tacloban City | Date Prepared: | 19-Mar-24 |
| TIN: | 941-580-929-000 | P.R. No.: | 2024-01-037 |
| | | Mode of Procurement: | NP 53.9 |

Gentlemen:

This is our **CONTRACT**, please furnish this Office the following articles subject to the terms and conditions contained/attached herein. "Suit/s arising from this Contract shall only be filed in the appropriate trial courts in the City of Calbayog, to the exclusion of all other courts."

| | | | |
|--------------------|---|----------------|--------------|
| Place of Delivery: | Supply Office, NwSSU-Main Campus, Calbayog City | Delivery Term: | 20 cd |
| Date of Delivery: | Commence upon receipt of Purchase Order | Payment Term: | |

| Stock/ Property No./Item No. | Unit | Description | Quantity | Unit Cost | Amount |
|---------------------------------------|------|---|----------|-----------|-----------|
| 7 | bot | PNSS (for irrigation), 1L/bot. | 6 | 90.00 | 540.00 |
| 17 | unit | Weighing Scale w/ height, superior accuracy, heavy duty solid, stable platform, height rod measure 76-198 cm., dual reading die cast, long-lasting durable steel construction, with warranty <i>(please see attached sample picture)</i> | 1 | 18,000.00 | 18,000.00 |
| | | ----- | | | |

| | | |
|------------------------------|--|------------------|
| Total Amount In Words | Eighteen Thousand Five Hundred Forty Pesos Only | 18,540.00 |
|------------------------------|--|------------------|

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 undelivered item/s and/or other possible sanction/s be imposed. No delivery within the contract duration, the University has the right to cancel the P.O.

Conforme:

INNOCARE PHARMA & MEDICAL SUPPLIES TRADING

Signature Over Printed Name of Supplier

Date

Very truly yours:

FOR AND IN THE PRESENCE OF THE UNIVERSITY PRESIDENT

BENJAMIN L. PECAYO, Ed. D.

University President

VICE PRESIDENT FOR ADMINISTRATIVE AFFAIRS

| | | | |
|------------------|---|-----------------------|-------|
| Fund Cluster: | <u>Fiduciary</u> | ORS/BURS No.: | _____ |
| Funds Available: | _____ | Date of the ORS/BURS: | _____ |
| | CORNELIO C. BAUTISTA JR. | Amount: | _____ |
| | Signature Over Printed Name of Chief Accountant/ Head of Accounting Division/Unit | | |

End-User: NwSSU Main/Clinic-Ellery D. Daguman



Award Notice Abstract (Ref No.: 4766849)

Status: Updated

| <p>Reference Number: 10537505</p> <p>Control Number: 2024-01-037</p> <p>Bid Notice Title: Supply and Delivery of Medical and Dental Supplies for University Health Center Use (FIDUCIARY/P.R. No. 2024-01-037)</p> <p>Approved Budget: Php103,185.37</p> <p>Procurement Mode: Negotiated Procurement - Small Value Procurement (Sec. 53.9)</p> <p>Classification: Goods</p> <p>Category: Medical and Dental Equipment</p> <p>Applicable Procurement Rules: Implementing Rules and Regulations</p> <p>Funding Source: Government of the Philippines (GOP)</p> <p>Funding Instrument: Corporate Budget for the Contract Approved by the Board</p> <p>Area of Delivery: Samar</p> <p>Delivery Period: 20 Day/s</p> <p>Contact Person: Jessamae Caparas</p> <p>Created By: Jessamae Caparas</p> | <p>NORTHWEST SAMAR STATE UNIVERSITY Rueda Extension Calbayog City Samar, Region VIII, Philippines S&D of Medical and Dental Supplies for Univ. (037)</p> <p>Awardee : VICRAL DEVELOPMENT CORPORATION Address : COR.COLON AND P.LOPEZ ST. Cebu City Cebu, Region VII, Philippines</p> <p>Contact Person : SONIA ROTA MAYOL Designation : SALES & MARKETING SUPERVISOR</p> | <p>Award Type: Award Notice</p> <p>Contract Amount: Php6,299.00</p> <p>Award Date: 19-Mar-2024</p> <p>Publish Date: 01-Apr-2024</p> <p>Date Last Updated: 01-Apr-2024</p> <p>Contract Number: 2024-03-090</p> <p>Proceed Date: 21-Mar-2024</p> <p>Contract Effectivity Date: 21-Mar-2024</p> <p>Contract End Date: 10-Apr-2024</p> <p>Created By: Jessamae Rondina Caparas</p> <p>Date Created: 01-Apr-2024</p> <p>Approver: Jessamae Rondina Caparas</p> <p>View Documents: 6</p> | | | | | | |
|---|--|---|---|------------------------------|--------|---|---|--------------|
| <p>Line Item</p> <table border="1"> <thead> <tr> <th>#</th> <th>Product/Service/Project Name</th> <th>Budget</th> </tr> </thead> <tbody> <tr> <td>3</td> <td>S&D of Medical and Dental Supplies for Univ. (037), 4 box Ambroxol 500mg Tablet (100/box); 3 box Ibuprofen + Paracetamol 200mg / 325 mg, Tablet, 100's/box; 12 bot Ethyl Alcohol, 70% 250ml., 42152200, 1, Lump Sum</td> <td>Php18,420.00</td> </tr> </tbody> </table> <p>Reason for Award : Lowest and Responsive Quotation.</p> | | | # | Product/Service/Project Name | Budget | 3 | S&D of Medical and Dental Supplies for Univ. (037), 4 box Ambroxol 500mg Tablet (100/box); 3 box Ibuprofen + Paracetamol 200mg / 325 mg, Tablet, 100's/box; 12 bot Ethyl Alcohol, 70% 250ml., 42152200, 1, Lump Sum | Php18,420.00 |
| # | Product/Service/Project Name | Budget | | | | | | |
| 3 | S&D of Medical and Dental Supplies for Univ. (037), 4 box Ambroxol 500mg Tablet (100/box); 3 box Ibuprofen + Paracetamol 200mg / 325 mg, Tablet, 100's/box; 12 bot Ethyl Alcohol, 70% 250ml., 42152200, 1, Lump Sum | Php18,420.00 | | | | | | |



PROCUREMENT OFFICE

Email ad: procurement@nwssu.edu.ph

TELEFAX: PLDT - (055) 2093122

PURCHASE ORDER

| | |
|--|-------------------------------------|
| Supplier: METRO RETAIL STORES GROUP INC. | P. O. No.: 2024-03-090 |
| Address: Magsaysay Blvd., Brgy. East Awang, Calbayog City | Date Prepared: 19-Mar-24 |
| TIN: 226-527-915 | P.R. No.: 2024-01-037 |
| | Mode of Procurement: NP 53.9 |

Gentlemen:

This is our **CONTRACT**, please furnish this Office the following articles subject to the terms and conditions contained/attached herein. "Suit/s arising from this Contract shall only be filed in the appropriate trial courts in the City of Calbayog, to the exclusion of all other courts."

| | |
|---|-----------------------------|
| Place of Delivery: Supply Office, NwSSU-Main Campus, Calbayog City | Delivery Term: 20 cd |
| Date of Delivery: Commence upon receipt of Purchase Order | Payment Term: |

| Stock/ Property No./Item No. | Unit | Description | Quantity | Unit Cost | Amount |
|---------------------------------------|------|---|----------|-----------|----------|
| 1 | box | Ambroxol 500mg Tablet (100/box) | 4 | 800.00 | 3,200.00 |
| 3 | box | Ibuprofen + Paracetamol 200mg / 325 mg, Tablet, 100's/box | 3 | 850.00 | 2,550.00 |
| 9 | bot | Ethyl Alcohol, 70% 250ml. | 12 | 45.75 | 549.00 |
| ----- | | | | | |

Total Amount In Words **Six Thousand Two Hundred Ninety Nine Pesos Only** **6,299.00**

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 undelivered item/s and/or other possible sanction/s be imposed. No delivery within the contract duration, the University has the right to cancel the P.O.

Conforme:

METRO RETAIL STORES GROUP INC.

Signature Over Printed Name of Supplier

3/21/24

Date

FOR AND IN THE ABSENCE OF THE UNIVERSITY PRESIDENT:
 Very truly yours,

BENJAMIN L. PECAYO, Ed. D.

University President

VICE PRESIDENT FOR ADMINISTRATIVE AFFAIRS

| | |
|---|-----------------------|
| Fund Cluster: Fiduciary | ORS/BURS No.: |
| Funds Available: | Date of the ORS/BURS: |
| CORNELIO C. BAUTISTA JR. | Amount: |
| Signature Over Printed Name of Chief Accountant/ Head of Accounting Division/Unit | |
| End-User: NwSSU Main/Clinic-Ellery D. Daguman | |



Award Notice Abstract (Ref No.: 4766850)

Status: Updated

| <p>Reference Number: 10537505</p> <p>Control Number: 2024-01-037</p> <p>Bid Notice Title: Supply and Delivery of Medical and Dental Supplies for University Health Center Use (FIDUCIARY/P.R. No. 2024-01-037)</p> <p>Approved Budget: Php103,185.37</p> <p>Procurement Mode: Negotiated Procurement - Small Value Procurement (Sec. 53.9)</p> <p>Classification: Goods</p> <p>Category: Medical and Dental Equipment</p> <p>Applicable Procurement Rules: Implementing Rules and Regulations</p> <p>Funding Source: Government of the Philippines (GOP)</p> <p>Funding Instrument: Corporate Budget for the Contract Approved by the Board</p> <p>Area of Delivery: Samar</p> <p>Delivery Period: 20 Day/s</p> <p>Contact Person: Jessamae Caparas</p> <p>Created By: Jessamae Caparas</p> | <p style="text-align: center;">NORTHWEST SAMAR STATE UNIVERSITY Rueda Extension Calbayog City Samar, Region VIII, Philippines S&D of Medical and Dental Supplies for Univ. (037)</p> <p>Awardee : SOUTH STAR DRUG INC. Address : eight forbes town road burgos circle Taguig City Metro Manila, NCR, Philippines</p> <p>Contact Person : christine marie viray aquino Designation : store in charge</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;">#</th> <th style="width: 60%;">Product/Service/Project Name</th> <th style="width: 35%;">Budget</th> </tr> </thead> <tbody> <tr> <td>4</td> <td>S&D of Medical and Dental Supplies for Univ. (037), 3 box Burn Ointment (benzocaine+boric acid+eucalyptus), 30 g, 42152200, 3, Box</td> <td>Php660.00</td> </tr> </tbody> </table> <p>Reason for Award : Lowest Quotation.</p> | # | Product/Service/Project Name | Budget | 4 | S&D of Medical and Dental Supplies for Univ. (037), 3 box Burn Ointment (benzocaine+boric acid+eucalyptus), 30 g, 42152200, 3, Box | Php660.00 | <p>Award Type: Award Notice</p> <p>Contract Amount: Php523.50</p> <p>Award Date: 19-Mar-2024</p> <p>Publish Date: 01-Apr-2024</p> <p>Date Last Updated: 01-Apr-2024</p> <p>Contract Number: 2024-03-091</p> <p>Proceed Date: 21-Mar-2024</p> <p>Contract Effectivity Date: 21-Mar-2024</p> <p>Contract End Date: 10-Apr-2024</p> <p>Created By: Jessamae Rondina Caparas</p> <p>Date Created: 01-Apr-2024</p> <p>Approver: Jessamae Rondina Caparas</p> <p>View Documents: 5</p> |
|---|--|-----------|------------------------------|--------|---|--|-----------|---|
| # | Product/Service/Project Name | Budget | | | | | | |
| 4 | S&D of Medical and Dental Supplies for Univ. (037), 3 box Burn Ointment (benzocaine+boric acid+eucalyptus), 30 g, 42152200, 3, Box | Php660.00 | | | | | | |



PROCUREMENT OFFICE
 Email ad: procurement@nwssu.edu.ph
 TELEFAX: PLDT - (055) 2093122
PURCHASE ORDER

| | | | |
|-----------|---------------------------------------|----------------------|--------------------|
| Supplier: | SOUTH STAR DRUG, INC | P. O. No.: | 2024-03-091 |
| Address: | Magsaysay Blvd., Calbayog City | Date Prepared: | 19-Mar-24 |
| TIN: | 228-037-432-229 | P.R. No.: | 2024-01-037 |
| | | Mode of Procurement: | NP 53.9 |

Gentlemen:
 This is our **CONTRACT**, please furnish this Office the following articles subject to the terms and conditions contained/attached herein. "Suit/s arising from this Contract shall only be filed in the appropriate trial courts in the City of Calbayog, to the exclusion of all other courts."

| | | | |
|--------------------|---|----------------|--------------|
| Place of Delivery: | Supply Office, NwSSU-Main Campus, Calbayog City | Delivery Term: | 20 cd |
| Date of Delivery: | Commence upon receipt of Purchase Order | Payment Term: | |

| Stock/ Property No./Item No. | Unit | Description | Quantity | Unit Cost | Amount |
|---------------------------------------|------|---|----------|-----------|--------|
| 5 | box | Burn Ointment (benzocaine+boric acid+eucalyptus), 30 g | 3 | 174.50 | 523.50 |
| | | | | | |

| | | |
|------------------------------|--|---------------|
| Total Amount In Words | Five Hundred Twenty Three Pesos and Fifty Centavos Only | 523.50 |
|------------------------------|--|---------------|

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 undelivered item/s and/or other possible sanction/s be imposed. No delivery within the contract duration, the University has the right to cancel the P.O.

Conforme:

SOUTH STAR DRUG, INC
 Signature Over Printed Name of Supplier
MARCH 21, 2024
 Date

Very truly yours,

BENJAMIN L. PECAYO, Ed. D.
 University President
 VICE PRESIDENT FOR ADMINISTRATIVE AFFAIRS

| | | | |
|---|------------------|-----------------------|-------|
| Fund Cluster: | <u>Fiduciary</u> | ORS/BURS No.: | _____ |
| Funds Available: | _____ | Date of the ORS/BURS: | _____ |
| CORNELIO C. BAUTISTA JR. Signature Over Printed Name of Chief Accountant/ Head of Accounting Division/Unit | | Amount: | _____ |
| End-User: NwSSU Main/Clinic-Ellery D. Daguman | | | |