

Republic of the Philippines
Province of Davao del Norte
 Government Center, Mankilam, Tagum City
PURCHASE ORDER

SEP 23 2020

Supplier : <u>LIFELINE DIAGNOSTICS SUPPLIES, INC.</u>	P.O. No. : <u>2020093636</u>
PhilGEPS Registration No. : <u>0935 147702</u>	Date : <u>September 22, 2020</u>
Address : <u>UNIT 101/102,Z. EXECUTIVE SUITE,1132 QUEZON AVE QC</u>	Mode of Procurement : <u>Bidding</u>
Tel / Fax #: <u>202007 - 18871832639594</u>	P.R. No. : <u>20053357</u>
Registration Certificate : <u>DTI</u>	

Req. Off.: PEEDO - BLOOD BANKING

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

Place of Delivery <u>PEEDO DAVAO DEL NORTE BLOOD CENTER,</u>	Delivery Term: <u>30Calendar Day/s</u>
Date of Delivery: <u>CAPITOL COMP.,MANKILAM,TAGUM CITY</u>	Payment Term : <u>ON ACCOUNT</u>

Item No.	Quantity/Unit	Description	Unit Cost	Amount
1	5 KIT	MONOLISA HBsAg;480T " Micro plate strips (Coated with monoclonal anti-HBs antibodies) " Concentrated washing solution " Negative control " Positive control " Conjugate diluent " Conjugate (Mouse monoclonal anti-HBs antibodies and goat polyclonal anti-HBs antibodies bound to the peroxidase. Lyophilized.) " Substrate buffer " Chromogen: TMB solution " Stopping solution	39,600.00	198,000.00
2	5 KIT	GENSCREEN HIV Ag-Ab ULTRA;480T " Micro plate strips (coated with monoclonal antibodies to P24 HIV-1 (mouse) and purified HIV-1 and HIV-2 antigens) " Concentrated washing solution " Negative control " Antibody Positive control (Human plasma positive for anti-HIV-1 antibodies) " Antigen positive control (Purified HIV-1 antigen inactivated) " Conjugate 1 (Biotinylated polyclonal antibodies to P24 HIV-1 sheep)	44,000.00	220,000.00

Handwritten: 09/23/2020

FOR USE OF PEEDO DAVAO DEL NORTE BLOOD CENTER LABORATORY	SUB TOTAL : P <u>418,000.00</u>
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Grand 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.

I hereby conform that NOTICE TO DELIVER shall be served to the PLACE OF DELIVERY stated herein three (3) days before the actual delivery of the item/s covered by this Purchase Order.

Conforme: *[Signature]* Very truly yours,
 (Signature over printed name) EDWIN I. JUBAHIB
Governor

Oct. 29, 20 **By the Authority of the Governor:**
ENGR. JOSIE JEAN R. RABANOZ, MPA, EnP
Provincial Administrator

(Date)

NOTE : This is an important paper and will cause great inconvenience if lost. Claim for payment from the Provincial Treasurer supported by this form to be attached to the voucher.

Republic of the Philippines
Province of Davao del Norte
 Government Center, Mankilam, Tagum City
PURCHASE ORDER

Supplier : <u>LIFELINE DIAGNOSTICS SUPPLIES, INC.</u>	P.O. No. : <u>2020093636</u>
PhilGEPS Registration No. : <u>09351447992</u>	Date : <u>September 22, 2020</u>
Address : <u>UNIT 101/102.Z. EXECUTIVE SUITE,1132 QUEZON AVE QC</u>	Mode of Procurement : <u>Bidding</u>
Tel / Fax #: <u>202007-188718321039594</u>	P.R. No. : <u>20053357</u>
Registration Certificate : <u>DTI</u>	

Req. Off.: **PEEDO - BLOOD BANKING**

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Place of Delivery: <u>PEEDO DAVAO DEL NORTE BLOOD CENTER,</u>	Delivery Term: <u>30Calendar Day/s</u>
Date of Delivery: <u>CAPITOL COMP., MANKILAM, TAGUM CITY</u>	Payment Term : <u>ON ACCOUNT</u>

Item No.	Quantity/Unit	Description	Unit Cost	Amount
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		<ul style="list-style-type: none"> " Conjugate 2 (Lyophilised peroxidase labelled Streptavidin and purified HIV-1 and HIV-2 antigens) " Conjugate diluent " Substrate buffer " Chromogen: TMB solution " Stopping solution 		
3	5 KIT	MONOLISA HCV Ag-Ab ULTRA V2;480T " Micro plate strips (Coated with monoclonal anti-capsid antibody of the HCV, purified recombinant hepatitis C antigens NS3, NS4 and a HCV capsid peptide) " Concentrated washing solution " Negative control " Antibody Positive control (Human serum containing antibodies to HCV) " Antigen positive control (Antigen positive control synthetic containing a lyophilized capsid peptide) " Antigen diluent " Conjugate 1 (Mouse biotinilated monoclonal antibodies against capsid HCV antigen) " Conjugate 2 (Mouse antibodies directed against human IgG/peroxidase and streptavidin/peroxidase)	133,800.00	669,000.00

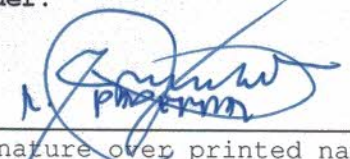
OCT 09 2020

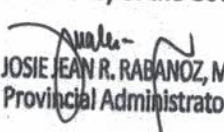
FOR USE OF PEEDO DAVAO DEL NORTE BLOOD CENTER LABORATORY	SUB TOTAL :P 669,000.00
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Grand Total Amount in Words :

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.

I hereby conform that NOTICE TO DELIVER shall be served to the PLACE OF DELIVERY stated herein three(3) days before the actual delivery of the item/s covered by this Purchase Order.

Conforme: _____ Very truly yours,

 (Signature over printed name) EDWIN I. JUBAHIB
 Governor

By the Authority of the Governor:

 ENGR. JOSIE JEAN R. RABANOZ, MPA, EnP
 Provincial Administrator

 (Date) Oct. 29, 20

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PURCHASE ORDER

Supplier : <u>LIFELINE DIAGNOSTICS SUPPLIES, INC.</u>	P.O. No. : <u>2020093636</u>
PhilGEPS Registration No. : <u>09125 144 7902</u>	Date : <u>September 22, 2020</u>
Address : <u>UNIT 101/102,Z. EXECUTIVE SUITE,1132 QUEZON AVE QC</u>	Mode of Procurement : <u>Bidding</u>
Tel / Fax #: <u>202007-16871832 03 95 94</u>	P.R. No. : <u>20053357</u>
Registration Certificate : <u>DTI</u>	

Req. Off.: **PEEDO - BLOOD BANKING**

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

Place of Delivery: <u>PEEDO DAVAO DEL NORTE BLOOD CENTER,</u> Date of Delivery: <u>CAPITOL COMP., MANKILAM, TAGUM CITY</u>	Delivery Term: <u>30Calendar Day/s</u> Payment Term : <u>ON ACCOUNT</u>
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Item No.	Quantity/Unit	Description	Unit Cost	Amount
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4	5 KIT	" Substrate buffer " Chromogen: TMB solution " Stopping solution TREPSURE;960T	60,000.00	300,000.00
		" Micro plate strips (coated with specific recombinant treponemal antigens) " Concentrated washing solution " Negative control (Human) " Calibrator (Human) " Positive control (Human) " Conjugate (Conjugated with specific recombinant treponemal antigens) " Substrate " Stopping solution		

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- Other Requirements*
1. All reagents should be compatible with the tie-up EIA micro plate analyzer.
 2. Controls, Calibrators and other Accessories must be included.
 3. Must have proven good track records and have more than 30 installations to different major blood banks / blood centers

FOR USE OF PEEDO DAVAO DEL NORTE BLOOD CENTER LABORATORY	SUB TOTAL :P 300,000.00 GRAND TOTAL :P 1,387,000.00
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Grand Total Amount in Words : **ONE MILLION THREE HUNDRED EIGHTY SEVEN THOUSAND and 0/100**

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.

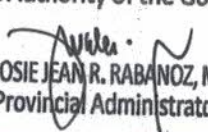
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Conforme: 

 (Signature over printed name)
 Oct. 29, 20

 (Date)

Very truly yours,
 EDWIN I. JUBAHIB
 Governor

By the Authority of the Governor:

 ENGR. JOSIE JEAN R. RABANOZ, MPA, EnP
 Provincial Administrator

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PURCHASE ORDER

Supplier : <u>LIFELINE DIAGNOSTICS SUPPLIES, INC.</u>	P.O. No. : <u>2020093636</u>
PhilGEPS Registration No. : <u>0985 144 9999</u>	Date : <u>September 22, 2020</u>
Address : <u>UNIT 101/102.Z. EXECUTIVE SUITE, 1132 QUEZON AVE QC</u>	Mode of Procurement : <u>Bidding</u>
Tel / Fax #: <u>202007-1857183263 9594</u>	P.R. No. : <u>20053357</u>
Registration Certificate : <u>DTI</u>	

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Item No.	Quantity/Unit	Description	Unit Cost	Amount
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- nationwide.*
4. *Must be included in the list of test kits as to the guidance for referral of blood sample for confirmatory set by NRL-NVBSP (Department Circular No. 2012-0198).*
 5. *Local Distributor must be ISO 9001>2008 Certified.*
 6. *Distributor must do repairs and routine maintenance of the EIA machine.*
 7. *All costs of parts and labor for wear and tear of the EIA machine will be on the account of the Distributor.*
 8. *The Distributor shall train the operator of the machine (medical technologists) on how to:*
 - Operate the instrument on a daily basis
 - Set up an initiate an assay run
 - Handle / store kits
 - Operate the software
 - Properly maintain the machine
 - Result interpretation
 - Troubleshooting

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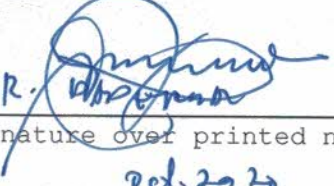
FOR USE OF PEEDO DAVAO DEL NORTE BLOOD CENTER LABORATORY	SUB TOTAL :P GRAND TOTAL :P 1,387,000.00
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Grand Total Amount in Words : ONE MILLION THREE HUNDRED EIGHTY SEVEN THOUSAND and 0/100

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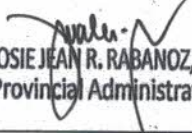
I hereby conform that NOTICE TO DELIVER shall be served to the PLACE OF DELIVERY stated herein three (3) days before the actual delivery of the item/s covered by this Purchase Order.

Conforme:


R. J. Rabanoz
 (Signature over printed name)
Oct. 29, 20
 (Date)

Very truly yours,

EDWIN I. JUBAHIB
Governor

By the Authority of the Governor:

ENGR. JOSIE JEAN R. RABANOZ, MPA, EnP
 Provincial Administrator

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PhilGEPS Registration No. :	Date : <u>September 22, 2020</u>
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Date of Delivery: <u>CAPITOL COMP.,MANKILAM,TAGUM CITY</u>	Payment Term : <u>ON ACCOUNT</u>

Item No.	Quantity/Unit	Description	Unit Cost	Amount
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PERIOD OF DELIVERY: 30 DAYS

The award is based on Abstract No. 0920203200
 dated September 03, 2020 under Bid No. B20200339
 opened on September 02, 2020

OCT 09 2020

FOR USE OF PEEDO DAVAO DEL NORTE BLOOD CENTER LABORATORY	SUB TOTAL :P
	GRAND TOTAL :P <u>1,387,000.00</u>

Grand Total Amount in Words : ONE MILLION THREE HUNDRED EIGHTY SEVEN THOUSAND and 0/100

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Conforme:

R. Rabanoz
 (Signature over printed name)

Oct. 29, 20
 (Date)

Very truly yours,

EDWIN I. JUBAHIB
 Governor

By the Authority of the Governor

Josie Jean R. Rabanoz
 ENGR. JOSIE JEAN R. RABANOZ, MPA, EnP
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