



NOTICE OF AWARD

The Manager
BIOSITE MEDICAL INSTRUMENTS
512, Manga St., Juna Subdivision

NOA No. : **BAC20220067**

Date : **January 14, 2022**

Dear Sir/Madam :

Pursuant to the Provisions of R.A. 9184, Notice of Award is hereby served for being the Lowest Calculated Responsive Bid **PROCUREMENT OF MEDICAL SUPPLIES FOR THE CONSUMPTION OF THE THREE (3) DDN HOSPITALS FOR YEAR 2022 (LAB. REAGENTS - CLINICAL CHEMISTRY)**.

The award is based on Abstract No. **1220211276** dated **January 10, 2022** under Bid No. **20218417B** opened on **December 28, 2021**.

Total Contract Price : **₱12,499,000.00**
OR No./Surety Bond No. : _____
Performance Bond Posted : _____ Date : _____
P.O. No. : **2022010067**
Office : **PEEDO - DavNor Pharmacy**

Corresponding Purchase Order will only be served upon posting of the required **Performance bond within 10 calendar days from receipt of notice** which shall be equivalent to the following:

Form of Security	Minimum Amount in % of Total Contact Price
a) Cash or cashier's/manager's check issued by a Universal or Commercial Bank	Goods and Consulting Services - Five Percent (5%)
b) Bank draft/guarantee or irrevocable letter of credit issued by a Universal or Commercial Bank: Provided, however, that it shall be confirmed or authenticated by a Universal or Commercial Bank, if issued by a foreign bank.	Infrastructure Projects - Ten Percent (10%)
c) Surety bond callable upon demand issued by a surety or insurance company duly certified by the Insurance Commissions as authorized to issue such security.	Thirty Percent (30%)

Please be guided accordingly.

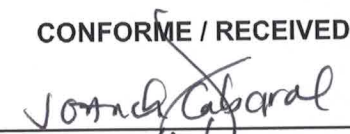
Very truly yours,


HON. EDWIN I. JUBAHIB
Governor

IMPORTANT :

NOTE : Bidder's bond can only be released upon posting the required Performance Bond. Failure to comply of the requirement to post Performance Bond within the stipulated period shall be a ground for blacklisting/suspension from the roster of bonafide bidders and forfeited of Bid Security pursuant to Section 40, IRR-A of R.A. 9184.

CONFORME / RECEIVED :


Signature over printed name (Authorized Personal)

Date : _____

ALEJANDRO R. OMILA JR.