

21-4108

LUNG CENTER OF THE PHILIPPINES

Quezon Avenue, Quezon City

APPENDIX a-2

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PURCHASE ORDER

Supplier:	MEDICAL TEST SYSTEMS, INC.	P.O. No.:	24115
Address:	Suite B 5/F DAO I Bldg., 189 Salcedo Street, Legaspi Village, Makati City, Philippines	Date:	03/25/2021
E-mail Address:	medtest@piddtsi.net	Mode of Procurement:	DIRECT CONTRACTING
Telephone No:	813-0067-69 ; 892-1250 ; 892-1737 ; 893-1443 ;	PURPOSE:	
TIN:	000-131-834-000	FOR SNL USE	

Gentlemen:

Please furnish this office the following articles subject to the terms and conditions contained herein:
LUNG CENTER OF THE PHILIPPINES

Place of Delivery:	///	Delivery Term:	60 CALENDAR DAYS
Date of Delivery:		Payment Term:	30 DAYS TERM

UNIT	DESCRIPTION	QTY	UNIT COST	AMOUNT
PCS	RNASE P INST. VERIFICATION PLATE, FAST 96-WELL	2	80,287.00	160,574.00
*****	NOTHING FOLLOWS *****			160,574.00
		TOTAL :	PHP	160,574.00

Total Amount in Words: ONE HUNDRED SIXTY THOUSAND FIVE HUNDRED SEVENTY FOUR and 00/100 Only

In case of failure to make the full delivery within the time specified above, a penalty of one tenth (1/10) of one (1) percent for everyday of delay shall be imposed for the undelivered portion.

Conforme: 
Signature over printed name of Supplier

Very truly yours,
SULLIAN SY-NAVAL, M.D.
DIRECTOR / OFFICER - IN - CHARGE

Date: 4/9/21

Funds Available: _____

ALOBS No.: SNL 114117-01-04-001

Amount: 160,574.00

8/9/21 phn 8/18



LUNG CENTER OF THE PHILIPPINES

Quezon Avenue Extension, Quezon City, Philippines 1100

ISO 9001:2015 CERTIFIED

NOTICE OF AWARD

March 23, 2021

MEDICAL TEST SYSTEMS, INC.

Suite B 5/F DAO I Bldg., 189 Salcedo St.

Legaspi Village, Makati City, Philippines

Tel: 813-00-67-69 / 892-12-50 / 892-17-37 / 893-14-43

Dear Sir / Madam;

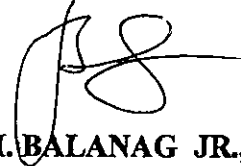
This is to inform you that as an **Exclusive Distributor**, we are directly contracting with you the **LABORATORY SUPPLIES FOR SNL-EREID LABORATORY USE** in the amount of **ONE HUNDRED SIXTY THOUSAND FIVE HUNDRED SEVENTY FOUR PESOS & 00/100 (160,574.00)** only.

<i>Unit</i>	<i>Description</i>	<i>Qty</i>	<i>Unit Cost</i>	<i>Amount</i>
PCS	RNASE P INST. VERIFICATION PLATE, FAST 96-WELL	2	80,287.00	160,574.00
	***** NOTHING FOLLOWS *****			160,574.00
TOTAL				160,574.00

TOTAL AMOUNT IN WORD ONE HUNDRED SIXTY THOUSAND FIVE HUNDRED SEVENTY FOUR PESOS & 00/100 (160,574.00) only.

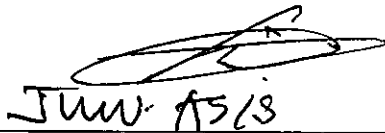
The original NOA with signature on "Conforme" shall be returned within ten (10) working days upon receipt.

Very truly yours,



VINCENT M. BALANAG JR., MD
Officer-In-Charge

Conforme:



Printed Name and Signature of Representative

Name of Bidder/Supplier MEDICAL TEST SYSTEMS INC.

Date: 3/23/21

3/23



LUNG CENTER OF THE PHILIPPINES
 Quezon Avenue Extension, Quezon City, Philippines 1100
 ISO 9001:2015 CERTIFIED

NOTICE TO PROCEED

March 26, 2021

MEDICAL TEST SYSTEMS, INC.
 Suite B 5/F DAO I Bldg., 189 Salcedo St.
 Legaspi Village, Makati City, Philippines
 Tel: 813-00-67-69 / 892-12-50 / 892-17-37 / 893-14-43

Dear Sir/ Madam:

This is to inform you that **Purchase Order No. 24115 LABORATORY SUPPLIES FOR SNL-EREID LABORATORY USE** has been approved. You May now proceed with delivery of the item listed in the said Purchase order.

Delivery should be completed within **sixty (60) calendar days** from receipt of this notice.

Enclosed in the original Purchase Order for your ready reference in the execution of this transaction.

Very truly yours,

VINCENT M. BALANAG JR., MD
 Executive Director

CONFORME:
 Received Original

Signature Over Printed Name
 Authorized Representative

Date: 8/6/21 4/13