

21-423  
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**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.: 24224  
 Address: Suite B 5/F DAO I Bldg., 189 Salcedo Street, Legaspi Village, Makati City, Philippines Date: 04/30/2021  
 E-mail Address: medtest@pidtdsl.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 **60 CALENDAR DAYS**  
 Place of Delivery: ++ Delivery Term: 30 DAYS TERM  
 Date of Delivery: \_\_\_\_\_ Payment Term: \_\_\_\_\_

UNIT	DESCRIPTION	QTY	UNIT COST	AMOUNT
PCS	RNASE P INST. VERIFICATION PLATE, FAST 96-WELL	1	80,287.00	80,287.00
*****	NOTHING FOLLOWS *****			80,287.00
		TOTAL :	PHP	80,287.00

Total Amount in Words: EIGHTY THOUSAND TWO HUNDRED EIGHTY SEVEN 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]*  
MARLOU TIBON  
 Signature over printed name of Supplier  
 Date: 5-27-21

Very truly yours,  
SULLIAN SY-NAVAL, MD  
 DIRECTOR / OFFICER - IN - CHARGE  
[Redacted]  
 SNL EREND

Funds Available: \_\_\_\_\_ ALOBS No.: 21-05-002  
 Amount: ₱ 80,287.00

6/9/21 Posted 6/10

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

**NOTICE OF AWARD**

April 28, 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;**

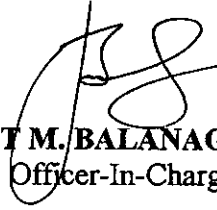
This is to inform you that as an **Exclusive Distributor**, we are directly contracting with you the **LABORATORY SUPPLIES FOR SUB-NATIONAL LABORATORY (SNL) USE** in the amount of **EIGHTY THOUSAND TWO HUNDRED EIGHTY SEVEN PESOS & 00/100 (80,287.00)** only.

<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	1	80,287.00	80,287.00
	***** NOTHING FOLLOWS *****			80,287.00
<b>TOTAL</b>				<b>82,287.00</b>

**TOTAL AMOUNT IN WORD EIGHTY THOUSAND TWO HUNDRED EIGHTY SEVEN PESOS & 00/100 (80,287.00) 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:

  
MARTOU TABON  
Printed Name and Signature of Representative  
Name of Bidder/Supplier MEDIST INK  
Date: 4-28-21

**LUNG CENTER OF THE PHILIPPINES**

Quezon Avenue Extension, Quezon City, Philippines 1100

ISO 9001:2015 CERTIFIED

**NOTICE TO PROCEED**

May 3, 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

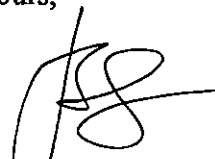
**Dear Sir/ Madam:**

This is to inform you that **Purchase Order No. 24224 LABORATORY SUPPLIES FOR SUB-NATIONAL LABORATORY (SNL) 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: 6-7-21