

LUNG CENTER OF THE PHILIPPINES
Quezon Avenue, Quezon City

APPENDIX a-2

*Scanned
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PURCHASE ORDER

Supplier: RESPICARE ENTERPRISES, INC. P.O. No.: 24712
 Address: Narciso Bldg. II, 23 Fisheries Street, Barangay Date: 09/28/2021
Vasra, Quezon City Mode of Procurement: DIRECT CONTRACTING
 E-mail Address: _____ PURPOSE: _____
 Telephone No: 920-7855 ; 709-6442 ; 455-1052 ; 387-6412 FOR RICU USE
 TIN: 100-050-266-000

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

Place of Delivery: LUNG CENTER OF THE PHILIPPINES Delivery Term: 30 - 45 DAYS
 Date of Delivery: 11 Payment Term: 30 DAYS TERM

UNIT	DESCRIPTION	QTY	UNIT COST	AMOUNT
PCS	BP CUFF ADULT FOR MINDRAY PATIENT MONITOR	15	2,800.00	42,000.00
PCS	FINGER PROBE FOR SPO2 (ADULT), REUSEABLE	5	7,500.00	37,500.00
*****	NOTHING FOLLOWS *****			79,500.00
		TOTAL :	PHP	79,500.00

Total Amount in Words: SEVENTY NINE THOUSAND FIVE HUNDRED 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: *Marlon L. Reyes* Very truly yours,
 Signature over printed name of Supplier SULLTAN SY-NAVAL, M.D.
 Date: 10-20-21 DIRECTOR / OFFICER - IN - CHARGE

Funds Available: _____ ALOBS No.: MO-21-10-3003
 Amount: ₱ 79,500.00

10/25 *paid 11/24*

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

NOTICE OF AWARD

September 27, 2021

RESPICARE ENTERPRISES, INC
Narciso Bldg. II, 23 Fisheries Street,
Barangay Vastra, Quezon City
Tel. No: 920-78-55 / 709-64-42 / 455-10-52 / 387-64-12

Dear Sir / Madam;

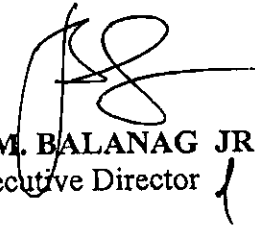
This is to inform you that as an Exclusive Distributor, we are directly contracting with you the **MEDICAL ACCESSORIES FOR RESPIRATORY INTENSIVE CARE UNIT (RICU) USE** in the amount of **SEVENTY NINE THOUSAND FIVE HUNDRED PESOS 00/100 (79,500.00) only.**

Unit	Description	Qty	Unit Cost	Amount
PCS	BP CUFF ADULT FOR MINDRAY PATIENT MONITOR	15	2,800.00	42,000.00
PCS	FINGER PROBE FOR SPO2, ADULT, REUSABLE	5	7,500.00	37,500.00
	***** NOTHING FOLLOWS *****			79,500.00
TOTAL				79,500.00

TOTAL AMOUNT IN WORDS SEVENTY NINE THOUSAND FIVE HUNDRED PESOS 00/100 (79,500.00) 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
Executive Director

Conforme:

Approved
Markon F. Perjes

Printed Name and Signature of Representative
Name of Bidder/Supplier Respicare
Date: 10-20-21

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

NOTICE TO PROCEED

September 29, 2021

RESPICARE ENTERPRISES, INC.

Narciso Bldg. II, 23 Fisheries Street,

Barangay Vastra, Quezon City

Tel. No: 920-78-55 / 709-64-42 / 455-10-52 / 387-64-12

Dear Sir/ Madam:

This is to inform you that **Purchase Order No. 24712 MEDICAL ACCESSORIES FOR RESPIRATORY INTENSIVE CARE UNIT (RICU) USE** has been approved. You May now proceed with delivery of the item listed in the said Purchase order.

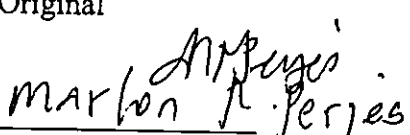
Delivery should be completed within thirty to forty five (30-45) days from receipt of this notice.

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: 10-20-21