

**LUNG CENTER OF THE PHILIPPINES**  
Quezon Avenue, Quezon City

APPENDIX a-2

22-1012

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**PURCHASE ORDER**

<b>Supplier:</b> <u>FAS DIAGNOSTIC GROUP, INC.</u>	<b>P.O. No.:</b> <u>24891</u>
<b>Address:</b> <u>SH05, Otis 888, Paz M. Guazon St., Paco, Manila</u>	<b>Date:</b> <u>11/19/2021</u>
<b>E-mail Address:</b> _____	<b>Mode of Procurement:</b> <u>DIRECT CONTRACTING</u>
<b>Telephone No:</b> <u>(632) 353-4693</u>	<b>PURPOSE:</b> _____
<b>TIN:</b> _____	<u>FOR IMMUNOLOGY USE</u>

Gentlemen:

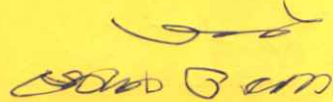
Please furnish this office the following articles subject to the terms and conditions contained herein:

<b>Place of Delivery:</b> <u>LUNG CENTER OF THE PHILIPPINES</u>	<b>Delivery Term:</b> <u>30 DAYS</u>
<b>Date of Delivery:</b> _____	<b>Payment Term:</b> <u>30 DAYS TERM</u>

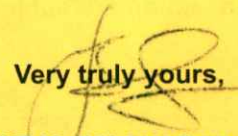
UNIT	DESCRIPTION	QTY	UNIT COST	AMOUNT
KIT	FERRITIN	30	24,300.00	729,000.00
	60 TEST / KIT			729,000.00
	***** NOTHING FOLLOWS *****			
		TOTAL :	PHP	729,000.00

**Total Amount in Words:** SEVEN HUNDRED TWENTY NINE THOUSAND 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

**Date:** 17 DEC 21

Very truly yours,  
  
\_\_\_\_\_  
**VINCENT M. BALANAG JR., M.D.**  
**DIRECTOR / OFFICER - IN - CHARGE**

**Funds Available:** \_\_\_\_\_

**ALOBS No.:** MO-21-12-3743

**Amount:** P 729,000.00

RDC

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# LUNG CENTER OF THE PHILIPPINES

Quezon Avenue-Extension, Quezon City, Philippines 1100

ISO 9001:2015 CERTIFIED

## NOTICE OF AWARD

November 18, 2021

**FAS DIAGNOSTIC GROUP, INC.**  
Sho5, Otis 888 Paz M. Guazon St.  
Paco Manila  
Tel. No: 353-46-93

Dear Sir / Madam;

This is to inform you that as an **Exclusive Distributor**, we are directly contracting with you the **LABORATORY SUPPLIES FOR IMMUNOLOGY SECTION USE** in the amount of **SEVEN HUNDRED TWENTY NINE THOUSAND PESOS & 00/100 (729,000.00)** only.

<i>Unit</i>	<i>Description</i>	<i>Qty</i>	<i>Unit Cost</i>	<i>Amount</i>
KIT	FERRITIN  60 TEST / KIT	30	24,300.00	729,000.00
	***** NOTHING FOLLOWS *****			729,000.00
<b>TOTAL</b>				<b>729,000.00</b>
<b>TOTAL AMOUNT IN WORD SEVEN HUNDRED TWENTY NINE THOUSAND PESOS &amp; 00/100 (729,000.00) only.</b>				

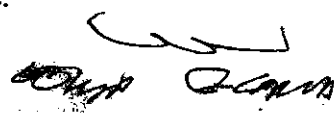
The original NOA with signature on "Conforme" shall be returned within ten (10) working days upon receipt.

Very truly yours,



VINCENT M. BALANAG JR., MD  
Executive Director

Conforme:



Printed Name and Signature of Representative

Name of Bidder/Supplier

Date:

**LUNG CENTER OF THE PHILIPPINES**

Quezon Avenue Extension, Quezon City, Philippines 1100

ISO 9001:2015 CERTIFIED

**NOTICE TO PROCEED**

November 22, 2021

**FAS DIAGNOSTIC GROUP, INC.**

Sho5, Otis 888 Paz M. Guazon St.

Paco Manila

Tel. No: 353-46-93

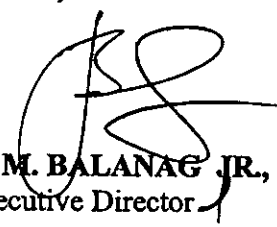
**Dear Sir/ Madam:**

This is to inform you that **Purchase Order No. 24891 LABORATORY SUPPLIES FOR IMMUNOLOGY SECTION 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 (30) days** from receipt of this notice.

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

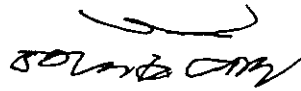
Very truly yours,



**VINCENT M. BALANAG JR., MD**  
Executive Director

CONFORME:

Received Original



Signature Over Printed Name

Authorized Representative

Date: 17 Nov 2021