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

**July 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. 24518 THREE (3) PIECES BP CUFF, ADULT FOR WARD 2B USE** has been approved. You May now proceed with delivery of the item listed in the said Purchase order.

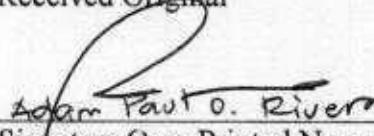
Delivery should be completed within **thirty to forty five (30-45) days** from receipt of this notice.

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

  
Adam Paul O. Rivern  
Signature Over Printed Name  
Authorized Representative  
Date: 08/13/2021

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

APPENDIX a-2

**PURCHASE ORDER**

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**Supplier:** RESPICARE ENTERPRISES, INC. **P.O. No.:** 24518  
**Address:** Narciso Bldg. 11, 23 Fisheries Street, Barangay **Date:** 07/28/2021  
Vasra, Quezon City **Mode of Procurement:** DIRECT CONTRACTING  
**E-mail Address:** \_\_\_\_\_ **PURPOSE:** \_\_\_\_\_  
**Telephone No:** 920-7855 ; 709-6442 ; 455-1052 ; 387-6412 **FOR WARD 28 USE**  
**TIN:** 100-050-266-000

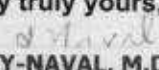
**Gentlemen:**  
 Please furnish this office the following articles subject to the terms and conditions contained herein:  
**Place of Delivery:** LUNG CENTER OF THE PHILIPPINES **Delivery Term:** 30 - 45 DAYS  
**Date of Delivery:** 11 **Payment Term:** 30 DAYS TERM

UNIT	DESCRIPTION	QTY	UNIT COST	AMOUNT
PCS	BP CUFF (ADULT)	3	2,800.00	8,400.00
	***** NOTHING FOLLOWS *****			8,400.00
	<b>TOTAL :</b>		<b>PHP</b>	<b>8,400.00</b>

**Total Amount in Words:** EIGHT THOUSAND FOUR 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:**   
Adam Paul O. Rivern  
 Signature over printed name of Supplier

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

**Date:** 08/13/2021

**Funds Available:** \_\_\_\_\_ **ALOBS No.:** MO-21-08-2186  
 \_\_\_\_\_ **Amount:** ₱ 8,400.00



# LUNG CENTER OF THE PHILIPPINES

Quezon Avenue Extension, Quezon City, Philippines 1100

ISO 9001:2015 CERTIFIED

## NOTICE OF AWARD

July 21 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 **THREE (3) PIECES BP CUFF, ADULT FOR WARD 2B USE** in the amount of **EIGHT THOUSAND FOUR HUNDRED PESOS 00/100 (8,400.00)** only.

Unit	Description	Qty	Unit Cost	Amount
PCS	BP CUFF, ADULT	3	2,800.00	8,400.00
	***** NOTHING FOLLOWS *****			8,400.00
<b>TOTAL</b>				<b>8,400.00</b>
<b>TOTAL AMOUNT IN WORDS EIGHT THOUSAND FOUR HUNDRED PESOS 00/100 (8,400.00) 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 1

Conforme:



Adam Paul O. Rivera  
Printed Name and Signature of Representative  
Name of Bidder/Supplier Respicare Ent. Inc.  
Date: 08/13/2021