



# LUNG CENTER OF THE PHILIPPINES

Quezon Avenue Extension, Quezon City, Philippines 1100

ISO 9001:2015 CERTIFIED

## NOTICE TO PROCEED

October 5, 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. 24724 MEDICAL SUPPLIES FOR OPERATING ROOM (O.R.) USE** has been approved. You May now proceed with delivery of the item listed in the said Purchase order.

Delivery should be completed within **ten (10) working 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: 10-10-21

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

APPENDIX a-2

*Scanned  
on 11/10/21*

**PURCHASE ORDER**

**Supplier:** RESPICARE ENTERPRISES, INC. **P.O. No.:** 24724  
**Address:** Narciso Bldg. 11, 23 Fisheries Street, Barangay **Date:** 10/04/2021  
Vesra, Quezon City **Mode of Procurement:** DIRECT CONTRACTING  
**E-mail Address:** \_\_\_\_\_ **PURPOSE:** \_\_\_\_\_  
**Telephone No:** 920-7855 ; 709-6442 ; 455-1052 ; 387-6412 **FOR OR USE** \_\_\_\_\_  
**TIN:** 100-050-266-000

Gentlemen: Please furnish this office the following articles subject to the terms and conditions contained herein: **10 WORKING DAYS**

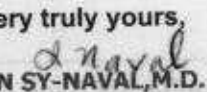
**Place of Delivery:** LUNG CENTER OF THE PHILIPPINES **Delivery Term:** \_\_\_\_\_  
**Date of Delivery:** 11-10-21 **Payment Term:** 30 DAYS TERM

UNIT	DESCRIPTION	QTY	UNIT COST	AMOUNT
PCS	PRESSURE TRANSDUCER (UMEC)	10	4,250.00	42,500.00
	IBP TRANSDUCER, DISPOSABLE BRAND : ICU MEDICAL			42,500.00
	***** NOTHING FOLLOWS *****			
	<b>TOTAL:</b>		PHP	42,500.00

**Total Amount in Words:** FORTY TWO 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:**   
EDCEL DOLAN  
 Signature over printed name of Supplier

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

**Date:** 11-10-21

**Funds Available:** \_\_\_\_\_ **ALOBS No.:** MO-21-10-3041  
 \_\_\_\_\_ **Amount:** ₱42,500.00



# LUNG CENTER OF THE PHILIPPINES

Quezon Avenue Extension, Quezon City, Philippines 1100

ISO 9001:2015 CERTIFIED

## NOTICE OF AWARD

October 1, 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 SUPPLIES FOR OPERATING ROOM (O.R.) USE** in the amount of **FORTY TWO THOUSAND FIVE HUNDRED PESOS 00/100 (42,500.00)** only.


Unit	Description	Qty	Unit Cost	Amount
PCS	PRESSURE TRANSDUCER (UMEC)  IBP TRANSDUCER, DISPOSABLE BRAND: ICU MEDICAL	10	4,250.00	42,500.00
	***** NOTHING FOLLOWS *****			42,500.00
<b>TOTAL</b>				<b>42,500.00</b>
<b>TOTAL AMOUNT IN WORDS FORTY TWO THOUSAND FIVE HUNDRED PESOS 00/100 (42,500.00) 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:

  
ERDEL ESPINOZA  
Printed Name and Signature of Representative  
Name of Bidder/Supplier INSPIRO  
Date: 11-10-21