

Republic of the Philippines Department of Health JOSE R. REYES MEMORIAL MEDICAL CENTER HOSPITAL BIDS AND AWARDS COMMITTEE

RIZAL AVE., STA, CRUZ, MANILA 711-9491 local 245

NOTICE TO EXECUTE FRAMEWORK AGREEMENT

Resolution No.: HBAC-A2 RESOLUTION NO. 0800 s. 2024

8 May 2024

CURASAVE PHARMA

Doña Paz Subd., Phase 1, Purok 4 Brgy. 40 Cruzada, Legaspi City, Albay Contact No.: 09171003593

Dear Sir/Madame:

This is to inform you that the Hospital Bids and Awards Committee - A2 (HBAC-A2) for the **Procurement of Various Drugs and Medicines REBID CY 2024** has found you to have submitted the **LOWEST, SINGLE CALCULATED AND RESPONSIVE BID** for the Procurement of the following item/s under **PIN NO. 2024-DM-029 and 2024-DM-030 / ITB NO. 2024-DM (REBID)-076 and 2024-DM (REBID)-077** opened last **1 April 2024** and you are hereby issued this **NOTICE TO EXECUTE FRAMEWORK AGREEMENT**:

Item No.	Item Description	Brand/ Country of Origin	TOTAL QTY	QTY (JR)	QTY (NCGH)	UNIT	UNIT PRICE (PhP)	TOTAL PRICE (PhP)
	GASTRO- INTESTINAL DRUGS & ANTIDOTES							
15	Pantoprazole 40 mg tablet BLISTER PACK	SUNIPRAZ / INDIA	13,500	13,500	0	tablet	5.50 VAT INCLUSIVE	74,250.00
	IMMUNOLOGICALS/ VACCINES/ HORMONES/ CORTECOSTEROIDS DRUGS							
6	Finasteride 5mg tablet BLISTER PACK	FIGNA-5 / INDIA	56,700	2,700	54,000	tablet	5.10 VAT INCLUSIVE	289,170.00
	GRAND TOTAL						363,420.00	

Note: *Ordering of the above-mentioned item(s) depends on the needs of the patient;

*To provide the updated COA requirements as stated in the COA Circular No. 2012-001 on or before payment if there is a document that will expire or if there are lacking documents.

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Please refer to Call-Off Order.



CHEL/Jen



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INSTRUCTIONS:

If you have no corrections to the contents of this Notice, please submit Performance Security within *Five* (5) Calendar Days from receipt hereof. The original copy of the NEFA should be signed and claimed at the BAC Secretariat Office. Failure to sign the NEFA and submit the Performance Security within the prescribed period shall constitute sufficient grounds for cancellation of the Award.

Very truly yours,		
WENCESLAO S. LLAUDERES, M.D., F Medical Center Chief II	PSNM, MPM-HG	
CONFORME:		
PRINTED NAME/POSITION	SIGNATURE	DATE