

	Address: 4th Fir., Wilson Corporate Center, 225 Wilso Street Greenhills, San Juan City Date:						:22_11_2111 11/11/2022 rocurement: SMALL VALUE PROCUREMENT		
Gentlemen:		urnish this o	office the following articles s	subject to the te	11 11				
Place of De		asig City Chil	ldren's Hospital		Delivery Term Payment Term			on of delivery	
ITEM						1	UNIT	or delivery	
NO.	UNIT	QTY	DESC	CRIPTION			COST	AMOUNT	
1	LOT	1	Olympus Microscope Model: CX21 SN: 0A82136  AB484300 Anti Mold Tablet 1 Scope of Services: *One Time Preventive Mainte *Diagnostic Check-up *Check-up of Prism *Greasing of All Mechanical F *Anti-Fungus Treatment *Calibration of All Mechanical *Alignment of Prism *Isolate Defective Parts	l pcs. enance Visit Parts			9,500.00	9,500.00	
Control No.	. 3933	,							
						SUBTO	DTAL:	Php 9,500.00	
ln c	ase of the faday of dela	ailure to mak y shall be imp VAN WIL	Thousand Five Hundred Pesos e the full delivery within the time posed as provided for by the, 20  LIAM L. CO   LANGE   Hundred ted name of Supplier)	specified above	84. Very truly	y yours,  CTOR MA.  (Author)	ne (1) percent <b>REGIS N. S</b> e  orized Official)  y Mayor		
Requisition JOSE	LITO T. I	Read	MD, MMHOA, DP	Funds Availa	oble :  OUVY A. CUENCO  Chief Accountant		Amount:	Page - 1.	



Supplier: OMNIBUS BIO-MEDICAL SYSTEMS, INC.								5444
Address: 4th Flr., Wilson Corporate Center, 225 Wilso Street Greenhills, San Juan City						P.O. No.: 22_11_2111  Date: 11/11/2022  Mode of Procurement: SMALL VALUE PROCUREMENT		
Gentlemen						L		DE PROCUREMENT
	Please f	urnish this o	office the following articles s	subject to the te	erms and condit	ions containe	ed herein:	
Place of D Date of D	Oelivery : _F Oelivery :	Pasig City Chi	ldren's Hospital		Delivery Tern		R ys upon completion	on of delivery
ITEM					Tuyment Term	It. Widili 43 da		on or delivery
NO.	UNIT	QTY	DES	CRIPTION	-		UNIT COST	AMOUNT
2	LOT	1	Ultra-Low Freezer Model: MDF-U54V-PK SN: 13030052				35,000.00	35,000.00
			Scope of Services: A. One Time Preventive Mair B. Cleaning & Testing electric *Main Power Switch * Starting delay * Power delay * Compressor * Overload delay * Condenser fan motor * Defrost delay C. Refrigeration cycle * Cleaning of condenser * Check gas leakage * Cleaning of condenser filter * Check vibration & contact of D. Testing alarm system * Alarm test key * Filter alarm key * Buzzer key E. Drainage * Cleaning of Drain pan * Check drain hose * Floor exterior * Cleaning exterior unit * Check inner door	cal system				
Control N	o. <b>3933</b>				. 4.4			
33311533333333		onds Fouls	f T 1 F:- 11 1 1	D 0 I		SOBI	OTAL:	Php 44,500.00
ln :	case of the f y day of dela ne :	failure to mak ny shall be imp VAN WIL	e the full delivery within the time cosed as provided for by the, 20 LIAM L. CO Louis fruited name of Supplier)	specified above.	84. Very tru	ly yours, /ICTOR MA. (Auth	ne (1) percent  REGIS N. Solorized Official) by Mayor	
Requisition	oning Offic	e/Dept.:		Funds Availa	ble:			
	SELITO T.	Mond	MD, MMHOA, DP		UVY A. CUENO Chief Accounta	7 7	Amount:	Page - 2



Supplier :	OMNIBUS BIO-MEDICAL SYSTEMS, INC.					P.O. No.:	22-11-2111	
Address :	4th Flr., Wils	Ison Corporate Center, 225 Wilso Street Greenhills, San Juan City  Date:			-	11/11/2022		
Gentlemen:						Mode of Procu	rement: SMALL VALU	JE PROCUREMENT
Gennemen:		ırnish this	office the following articles s	ubject to the te	erms and conditi	ions containe	ed herein	
Place of De								
Date of De	elivery : P	asig City Chi	ildren's Hospital		Delivery Term	1: Refer to TO	R ys upon completion	- of J-1:
ITEM	T				Tuyment Tem	r. widiii 45 da	UNIT	on of delivery
NO.	UNIT	QTY	DESC	CRIPTION			COST	AMOUNT
			* Check door & door gasket F. Temperature checking & C				and the second s	111100111
3	LOT	1	Autoclave Model: MLS-3781 SN: PK360057  Scope of Services: A. One Time Preventive Main B. Cleaning & Disinfection of C. Thermostat checking D. Heater checking E. Control Panel testing F. Checking of Exhaust tank G. Electrical testing H. Circulaing fan I. Cleaning exterior unit J. Check inner foor K. Check door/lid & door gask L. Temperature checking & C	Unit			35,000.00 58,000.00	35,000.00 58,000.00
			Model: Rotanta 460R SN: 00001 16-01-00					
Control No.	. 3933			-		SUBTO	OTAL .	Db- 427 F00 00
Total Amo		rds One F		d Eige United	I Dagga Oul.	30010	JIAL:	Php 137,500.00
In c	ase of the fa day of delay	vilure to mak v shall be imp	LIAM L. CO   Jours Anno atted name of Supplier)	specified above	a penalty of one to 84. Very trui	ly yours,  ICTOR MA.  (Auth	REGIS N. Soorized Official)	
Requisition	ning Office	e/Dept.:		Funds Availa	ble :			
JOSE		Motel NORETE, I thorized Of	MD, MMHOA, DP	J	UVY A. CUENC Chief Accountar		Amount:	
	(2311							Page - 3



Address: 4th Fir., Wilson Corporate Center, 225 Wilso Street Greenhills, San Juan City					P.O. No.: 22-11-2111  Date: 11/11/20322  Mode of Procurement: SMALL VALUE PROCUREME			
Gentlemer		furnish this	office the following articles s	subject to the te				UE PROCUREMENT
Place of I			ldren's Hospital		Delivery Term Payment Term	: Refer to TOI	R	on of delivery
ITEM NO.	UNIT	QTY	DES	CRIPTION			UNIT COST	AMOUNT
5	LOT	2	Centrifuge Tablet Top Model: Rotoix 32A SN: 0042712-05 & 0042720- Scope of Work: * One Time Preventive Maint	enance Visit			9,000.00	18,000.00
			* Cleaning and Decontaminal  * Visual Check  - Check rotor, Buckets & Inse  * Check the electrical connect  - Check for control cable contect  - Check for imbalance connect  - Check for the lid lock  - Check for power supply  * Greasing  * Functional check  - LCD/LED check  - Key button check  - Imbalance switch check  - Lid lock check  * Calibration  * Light grease and gas pump	ects for crack, we tion nection ction	ar and tear corrosio	on signs		
6	LOT	1	Plasma Extractor Model: PE-10000 SN: PE1140148				9,000.00	9,000.00
Control N	I. 2022	· · · · · · · · · · · · · · · · · · ·				1		
Control N		1	To the time of the state of the			SUBTO	DTAL:	Php 164,500.00
ln	case of the t	failure to mak	Hundred Sixty-four Thousand to the full delivery within the time posed as provided for by the, 20	specified above	a penalty of one te 34.		ne (1) percent	
Conform			LIAM L. CO LOUIL, Anne ted name of Supplier)	Very truly yours,  VICTOR MA. REGIS N. SOTTO  (Authorized Official)  City Mayor				
Requisiti	oning Offic	e/Dept.:		Funds Availa	ble :			
JOS			MD, MMHOA, DP	J	UVY A. CUENC Chief Accountan	-	Amount:	
	(At	uthorized Of	ficial)	1				Page - 4



Supplier	Dier: OMNIBUS BIO-MEDICAL SYSTEMS, INC.					P.O. No. :	<b>-</b> 2111			
Address	: 4th Flr., Wi	ilson Corporate	Center, 225 Wilso Street Greenhills, San Juan City Date :				11/11/2022			
							rement: SMALL VALI			
Gentlemen			- CC							
	Please	urnish this	office the following articles s	subject to the te	erms and condition	ns containe	ed herein:			
Place of I	Delivery: F	Pasig City Chi	ldren's Hospital		Delivery Term :	Defeate TO	d			
Det (D):					within 45 da	within 45 days upon completion of delivery				
ITEM					,		UNIT	or delivery		
NO.	UNIT	QTY	DES	CRIPTION			COST	AMOUNT		
7	LOT	1	Platelet Incubator					The same of the sa		
	201		Model: Climax 100 SN:44617			× 1	9,000.00	9,000.00		
To provide the control of the contro			Scope of Work: One Time Preventive Mainte Check electrical and mechan Cleaning of interior and exter	nical parts						
A CONTRACTOR AND A CONT	Procedure of the explaining		*Purchase Order shall cover Reference							
			**************************************	hing Follows ***	********	*				
						and the same	initial Jury 6			
						100	METOCOLOUR AND			
						are the second	over the second			
			10 10 10 10 10 10 10 10 10 10 10 10 10 1				ti come equacità			
and a property of						m-deserve contracts	The state of the s			
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Parameter Anna Parame	Att and					***************************************	The second secon			
THE PERSON NAMED IN	District the second sec						# pro-			
Control of the Contro	eren uniqualitati									
Enhanced	d Preventive M	aintenance of L	aboratory Equipments for the use of	Pasig City Children	's Hospital					
A STATE OF S			1 1							
,	Ĺ						1			
							1			
Control N	o. <b>3933</b>					GRAND TO	TAL :	Php 173,500.00		
Total Am	nount in W	ords One H	łundred Seventy-three Thousa	and Five Hundre	d Pesos Only.					
In for ever	case of the f y day of dela	failure to mak	e the full delivery within the time posed as provided for by the, 20	specified above	a penalty of one ten	th (1/10) of o	one (1) percent			
Conform	ne:		by	Ast/	Very truly					
		VAN WII	LIAM L. CO / bruie Annel	temander	VIC		DECIS N S	0770		
	(Signa		ted name of Supplier)				REGIS N. So			
	, 0		9/22	$\mathcal{O}$			y Mayor	O		
		$I_D$	ate			J.,	, mayor			
Requisition	oning Offic	e/Dept.:		Funds Availa	ble :					
	13	/			( XXII)		Amount P	17 <i>h P</i>		
	9	Mose	740		UVY A. CUENCO	Λ	Amount:	177, 800		
JOS			ND, MMHOA, DP		Chief Accountant		OBR No.:	00-2022. 10-		
	(Aı	ıthorized Off	ficial)				- 0	1404-4431		
								Page - 5		