



# PURCHASE ORDER

## CITY GOVERNMENT OF PASIG

Agency Name

Supplier : <u>RBGM MEDICAL EXPRESS SALES, INC.</u>	P.O. No. : <u>23-02-0032</u>
Address : <u>138 Maginhawa St. Teachers Village, Diliman, Quezon City</u>	Date : <u>17 February 2023</u>
	Mode of Procurement: <u>PUBLIC BIDDING</u>

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

Place of Delivery : <u>Pasig City Children's Hospital</u>	Delivery Term : <u>90 calendar days</u>
Date of Delivery : _____	Payment Term : <u>within 45 days upon completion of delivery</u>

ITEM NO.	UNIT	QTY	DESCRIPTION	UNIT COST	AMOUNT
9	UNIT	1	<b>Electrocautery Machine, MEDTRONIC COVIDIEN</b> * Output configuration: Isolated Output * Display: 6.2 inched LCD touchscreen * Duty Cycle: Must be capable of operating at 25% duty cycle (10seconds active and 30 seconds inactive in any mode for a period of 4 hours) * must have different tones for the following settings: CUT, Coag, Bipolar and shared Coag * Must following settings MONOPOLAR CUT (Pure, Blend, combination of monopolar and hemostasis/dissection) For MONOPOLAR COAG (Soft, Fulfurate, Spray, Shared Coag): Must BIPOLAR (Precise, Standard, Macro, Low, Medium, High) * Have neutral elecctrol alarm * Must have (1) Bipolar output plug and (2) monopolar; capable of (2) simultaneous monopolar coagulation * Must be supplies with the following pedals: (1) monopolar footswitch (1) and for independent bipolar use. * Should be splash proof and with low voltage, safe medical grade design. * Machine must be compatible with all return pads currently available in the Philippine market. Display: 6.2 inches LCD touchscreen * Machine must be compatible with all return pads currently available in the Philippine market. * ACCESSORIES: (1) unit trolley compatible with the machine;	949,059.00	949,059.00

Control No. **3953** **GRAND TOTAL : Php 949,059.00**

**Total Amount in Words** Nine Hundred Forty-nine Thousand Fifty-nine Pesos Only.

In case of the failure to make the full delivery within the time specified above, a penalty of one tenth (1/10) of one (1) percent for every day of delay shall be imposed as provided for by the, 2016 IRR of RA 9184.

Very truly yours,

**JOHN GHIVEHN NATIVIDAD**  
*(Signature over printed name of Supplier)*  
03/04/23  
 Date
 

**VICTOR MA. REGIS N. SOTTO**  
*(Authorized Official)*  
 City Mayor

Requisitioning Office/Dept. : <u>MOH</u>	Funds Available : <u>JUVY A. CUENCO</u>	Amount : <u>P 949,059.-</u> <u>100-2023-00-</u> OBR No. : <u>0015-10100</u>
<b>JOSELITO T. MORETE, MD. MMHOA, DPBA, F</b>	<b>JUVY A. CUENCO</b>	



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ITEM NO.	UNIT	QTY	DESCRIPTION	UNIT COST	AMOUNT
			(1) Universal Monopolar Adaptor; (1) Monopolar Cable for minimally invasive applications (1) monopolar and bipolar foot pedal; ten (10) - Monopolar Pencils/unit; (10) Disposable pediatric return pad. ten (10) disposable neonatal return pad; (1) force triverse; (1) Bayonet Cushing Bipolar Forceps; (1) Bipolar Footswitch Cord  The equipment must be BRAND NEW unit and under 2 years warranty ***** Nothing Follows *****		

Control No. **3953**

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Very truly yours,

Conforme :

**JOHN GHIVEHN NATIVIDAD**

(Signature over printed name of Supplier)

02/06/23

Date

*ARMANDO JOY FICAMENDA*

**VICTOR MA. REGIS N. SOTTO**

(Authorized Official)

City Mayor

Requisitioning Office/Dept. :

**JOSELITO T. MORETE, MD, MMHOA, DPBA, F**

Funds Available :

**JUVY A. CUENCO**

Amount : 949,059.-  
100-0023-001  
OBR No. : 0015-1000