



Central Mindanao University
BIDS AND AWARDS COMMITTEE
 Musuan, Bukidnon

NOTICE OF AWARD

December 16, 2019

BENJAMIN RUEL S. KUIZON
 Manager
FIRST BAY PHARMA DISTRIBUTOR
 PhilGEPS Registration No. 2007-38200
 #8 Osmena Village M, L Quezon Ave.
 Maguikay, Mandaue City

Dear Sir:

This is to inform you that your bid proposal for the project **PROCUREMENT OF DRUGS & MEDICINES, MEDICAL & LABORATORY SUPPLIES** which shall be funded under **STF** after having been post-qualified and declared to have obtained the Lowest Calculated Responsive Bid, has been recommended for award by the Bids and Awards Committee (BAC) of Central Mindanao University by virtue of **BAC Resolution No. STF-PB-19-084**, and the same has been approved by the Central Mindanao University thru the undersigned at the amount of *Seven Hundred Sixty Nine Thousand Three Hundred Eighty-Five Pesos Only (Php 769,385.00)* **for Lot 1 and 2**. You are hereby requested to manifest your acceptance of this Notice of Award.

Relative thereto, and in accordance with the provisions of the documents and Revised R.A. No. 9184, otherwise known as the Government Procurement Reform Act and its Implementing Rules and Regulations, you are hereby instructed to submit the following documents with ten (10) calendar days from the date of your receipt of this Notice of Award to within:

A. PERFORMANCE SECURITY

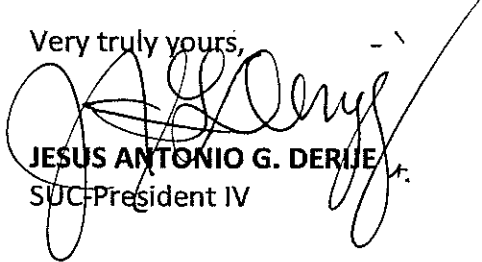
This is to be posted in favor of the Central Mindanao University, in the form of cash, manager's check, cashier's check, bank draft/guarantee confirmed by local bank, irrevocable letter of credit issued by a reputable bank, surety bond callable upon demand, issued by the Government Service Insurance System or any reputable surety or insurance company duly accredited by the Office the Insurance Commissioners, or a combination thereof **IN ACCORDANCE** with the following schedule:

FORM OF PERFORMANCE SECURITY	AMOUNT OF PERFORMANCE SECURITY (EQUAL TO PERCENTAGE OF THE TOTAL CONTRACT PRICE)
Cash or cashier's/manager's check issued by a Universal or Commercial Bank.	Five percent (5%)
Bank draft/guarantee or irrevocable letter of credit issued by a Universal or Commercial Bank: Provided, however, that it shall be confirmed or authenticated by a Universal or Commercial Bank, if issued by a foreign bank.	
Surety bond callable upon demand issued by a surety or insurance company duly certified by the Insurance Commission as authorized to issue such security; and/or	Thirty percent (30%)
Any combination of the foregoing.	Proportionate to share of form with respect to total amount of security

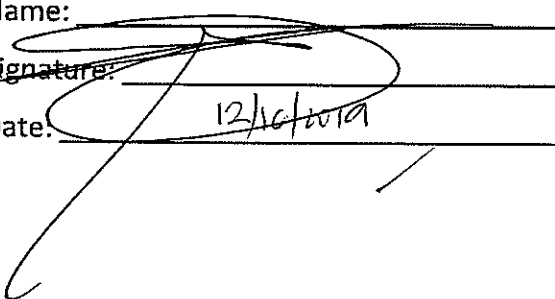
Within the same period of ten (10) days as indicated above, you are directed to enter into and execute the Goods Contract with the University.

This Performance Security shall be forfeited in favor to Central Mindanao University in the event of default on your part in the performance of any of your obligations under the Contract.

Finally, it must be noted that you shall not commence the work nor initiate the procurement of materials for the project prior to your receipt of the Notice to Proceed.

Very truly yours,

JESUS ANTONIO G. DERIJE
SUC-President IV

Received, Acknowledged and Accepted:

Name: _____
Signature:  _____
Date: 12/16/2019 _____

OFFICE OF THE BIDS AND AWARDS COMMITTEE

CONTRACT OF AGREEMENT

REF. NO. STF-PB-19-094

THIS AGREEMENT made this day of December, 2019 between CENTRAL MINDANAO UNIVERSITY of the Philippines (hereinafter called "the Entity") of the one part and **FIRST BAY PHARMA DISTRIBUTOR** at #8 Osmena Village M.L. Quezon Ave. Maguikay, Mandaue City (hereinafter called "the Supplier") of the other part:

Whereas, the Entity invited Bids for certain goods and ancillary services, viz., **PROCUREMENT OF DRUGS & MEDICINES, MEDICAL & LABORATORY SUPPLIES** and has accepted a Bid by the Supplier for the supply of those goods and services in the sum of Seven Hundred Sixty Nine Thousand Three Hundred Eighty-Five Pesos Only (Php 769,385.00) with the items listed below:

ITEM	UNIT	QTY	DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
LOT 1 = 269,255.00					
1	5 /	Piece	BP Bulb with Airflow Control	2,000.00	10,000.00
2	3 /	Box	Clean Gloves, Hypoallergenic, Large	400.00	1,200.00
3	10 /	Box	Clean Gloves, Medium	400.00	4,000.00
4	7 /	Box	Clean Gloves, Small	400.00	2,800.00
5	20 /	Piece	Cord Clamp	10.00	200.00
6	5 /	Rolls	ECG Paper Strips, 50x30mm	350.00	1,750.00
7	50 /	Piece	IV Cannula, G-18	30.00	1,500.00
8	150 /	Piece	IV Cannula, G-20	30.00	4,500.00
9	350 /	Piece	IV Cannula, G-22	30.00	10,500.00
10	450 /	Piece	IV Cannula, G-24	30.00	13,500.00
11	500 /	Set	IV infusion set, Macroset	100.00	50,000.00
12	500 /	Set	IV infusion set, Microset	100.00	50,000.00
13	12 /	Piece	Medicated Paraffin Gauze Dressings, 10cmx10cm	100.00	1,200.00
14	12 /	Piece	Medicated Paraffin Gauze Dressings, 5cmx5cm	100.00	1,200.00
15	200 /	Set	Nebulizing set	75.00	15,000.00
16	25 /	Piece	Oxygen Cannula, Adult	50.00	1,250.00
17	180 /	Roll	Plaster, Micropore, 1"	50.00	9,000.00
18	60 /	Roll	Plaster, Transpore, 1"	60.00	3,600.00
19	1 /	Box	Suture, Prolene 3/0 12pcs./box	2,000.00	2,000.00
20	1 /	Box	Suture, Prolene 2/0 12pcs./box	2,000.00	2,000.00
21	500 /	Piece	Syringe, 1ml with needle (good quality)	10.00	5,000.00
22	2500 /	Piece	Syringe, 3ml with needle (good quality)	7.00	17,500.00
23	3000 /	Piece	Syringe, 5mlwith needle (good quality)	7.00	21,000.00
24	3000 /	Piece	Syringe, 10mlwith needle (good quality)	10.00	30,000.00
25	50 /	Roll	Tissue	15.00	750.00
26	2 /	Box	Urine Collector, 100's/box	2,000.00	4,000.00
					263,450.00
LOT 2 ABC = 508,821.00					

1	2	Ampule	Amiodarone, 150mg/ml	300.00	600.00
2	100	Tablet	Amlodipine, 10mg tablet	2.00	200.00
3	1000	Capsule	Amoxicillin, 500mg	5.00	5,000.00
4	500	Tablet	Amoxicillin + Clavulanic Acid, 625mg	20.00	10,000.00
5	20	Bottle	Amoxicillin + Clavulanic Acid, 400mg/57mg/5ml, 70ml Susp	350.00	7,000.00
6	300	Vial	Ampicillin Sodium, 1gm	30.00	9,000.00
7	5	Ampule	Atropine Sulfate, 1mg/1ml, 1ml	60.00	300.00
8	5	Ampule	B-Complex, 100mg/100mg/1mg, 3ml	70.00	350.00
9	500	Capsule	Cefalexin, 500mg	5.00	2,500.00
10	800	Vial	Ceftriaxone, 1g	35.00	28,000.00
11	500	Tablet	Cefuroxime, 500mg	25.00	12,500.00
12	1300	Vial	Cefuroxime, 750mg	30.00	39,000.00
13	25	Bottle	Cefuroxime, 250mg/5ml, 60ml Suspension	250.00	6,250.00
14	200	Capsule	Celecoxib, 200mg	3.00	600.00
15	200	Tablet	Cetirizine Hydrochloride, 10 mg	1.00	200.00
16	20	Bottle	Cetirizine, 5mg/5ml, 60ml Syrup	35.00	700.00
17	200	Capsule	Chloramphenicol, 500mg capsule	7.00	1,400.00
18	100	Tablet	Cinnarizine, 25mg	2.00	200.00
19	20	Bottle	Clarithromycin, 125mg/5ml, 60ml Suspension	290.00	5,800.00
20	200	Tablet	Clonidine Hydrochloride, 75mg	30.00	6,000.00
21	100	Tablet	Clopidogrel, 75mg	3.00	300.00
22	200	Capsule	Cloxacillin, 500mg	5.00	1,000.00
23	2	Ampule	Digoxin 0.5mg in 2ml	100.00	200.00
24	1	Vial	Dobutamine, 12.5mg/ml, 20ml	1,900.00	1,900.00
25	100	Tablet	Eperisone Hydrochloride, 50mg	50.00	5,000.00
26	2	Ampule	Haloperidol, 50mg/ml, 1ml	500.00	1,000.00
27	200	Vial	Hydrocortisone, 500 mg	140.00	28,000.00
28	20	Bottle	Ibuprofen, 100mg/5ml, 60ml Syrup	35.00	700.00
29	100	Tablet	Isoprinosine, 500mg	50.00	5,000.00
30	100	Tablet	Losartan potassium, 50mg	3.00	300.00
31	100	Tablet	Losartan potassium, 100mg	3.50	350.00
32	800	Capsule	Mefenamic Acid, 500mg	2.00	1,600.00
33	5	Tablet	Methylprednisolone, 4mg	20.00	100.00
34	100	Tablet	Metformin, 500mg	1.00	100.00
35	100	Ampule	Metoclopramide 5mg/ml, 2ml	15.00	1,500.00
36	20	Bottle	Metronidazole, 125mg/5ml, 60ml Syrup	20.00	400.00
37	300	Tablet	Metronidazole, 500mg	2.00	600.00
38	100	Tablet	Montelukast Sodium, 5mg, Chewable tab	10.00	1,000.00
39	100	Tablet	Montelukast Sodium, 10mg	10.00	1,000.00
40	10	Ampule	Nicardipine, 1mg/ml, 10ml	500.00	5,000.00
41	10	Bottle	Nystatin, 100,000 IU/ml, 30ml Suspension	189.00	1,890.00
42	100	Capsule	Omeprazole, 40mg	10.00	1,000.00
43	50	Vial	Omperazole, 40mg	100.00	5,000.00
44	20	Sachet	ORS-75 Replacement, 5.75g	4.00	80.00
45	80	Bottle	Paracetamol, 250mg/5ml, 60ml Syrup	30.00	2,400.00
46	20	Bottle	Paracetamol, 100mg/ml, 15ml Drops	30.00	600.00
47	10	Supp	Paracetamol, 250mg suppository	25.00	250.00
48	10	Supp	Paracetamol, 125mg suppository	27.00	270.00
49	1000	Tablet	Paracetamol, 500mg	1.00	1,000.00
50	800	Ampule	Ranitidine, 25mg/ml, 2ml	10.00	8,000.00
51	500	Nebule	Salbutamol Sulfate, 1mg/ml, 2.5ml	18.00	9,000.00

52	300	✓	Nebule	Salbutamol + Ipratropium, 2.5mg/500mcg/2.5ml, 2.5ml	30.00	9,000.00
53	10	✓	Tube	Silver Sulfadiazine, 1% cream, 15g	190.00	1,900.00
54	15	✓	Bottle	Terbutaline Sulfate, Nebulizing Solution, 2.5 mg/ml	167.00	2,505.00
55	3	✓	Tube	Terramycin, 3.5mg	350.00	1,050.00
56	100	✓	Ampule	Tetanus -Anti-toxin serum (equine) 3000 iu/ml	190.00	19,000.00
57	300	✓	Ampule	Tetanus Toxoid 0.5ml	80.00	24,000.00
58	20	✓	Ampule	Tramadol HCl 50mg/ml, 2ml	30.00	600.00
59	200	✓	Capsule	Tranexamic acid 500mg capsule	4.00	800.00
60	10	✓	Ampule	Tranexamic Acid, 100mg/ml, 5ml	50.00	500.00
61	100	✓	Tablet	Trimetazidine, 35mg	6.00	600.00
62	100	✓	Tablet	Verapamil, 40mg	50.00	5,000.00
63	2	✓	Ampule	Verapamil, 2.5mg/ml, 2ml	300.00	600.00
64	360	✓	Bottle	Mineral Water, 500ml	89.00	32,040.00
65	20	✓	Bottle	IV Fluid, D50W, 50ml	80.00	1,600.00
66	600	✓	Bottle	IV Fluid, D5 0.3 NaCl, 500ml	80.00	48,000.00
67	300	✓	Bottle	IV Fluid, D5 IMB, 500ml	90.00	27,000.00
68	720	✓	Bottle	IV Fluid, Plain 0.9 NaCl, 1L	75.00	54,000.00
69	720	✓	Bottle	IV Fluid, Plain LR, 1L	80.00	57,600.00
						505,935.00
					Grand total	769,385.00

NOW THIS AGREEMENT WITNESSETH AS FOLLOWS:

1. In this Agreement words and expressions shall have the same meanings as are respectively assigned to them in the Conditions of Contract referred to.
2. The following documents shall be deemed to form and be read and construed as part of this agreement, viz.:
 - (g) the Bid Form and the Price Schedule submitted by the Bidder;
 - (h) the Schedule of Requirements;
 - (i) the Technical Specifications;
 - (j) the General Conditions of Contract;
 - (k) the Special Conditions of Contract; and,
 - (l) the Entity's Notification of Award.
3. In consideration of the payments to be made by the Entity to the Supplier as hereinafter mentioned, the Supplier hereby covenants with the Entity to provide the goods and services and to remedy defects therein in conformity in all respects with the provisions of the Contract.
4. The Entity hereby covenants to pay the Supplier in consideration of the provision of the goods and services and the remedying of defects therein, the Contract Price or such other sum as may become payable under the provisions of the contract at the time and in the manner prescribed by the contract.

IN WITNESS whereof the parties hereto have caused this Agreement to be executed in accordance with the laws of the Republic of the Philippines on the day and year first above written.

The Common Seal of CMU, Musuan, Bukidnon was herein affixed in the presence of **DR. JESUS ANTONIO G. DERIJE**

Signed, sealed, and delivered by **FIRST BAY PHARMA DISTRIBUTOR** in the presence of **BENJAMIN RUEL S. KUIZON**.

Binding Signature of Entity:

[Handwritten Signature]
JESUS ANTONIO G. DERJE
 President

Binding Signature of Supplier:

[Handwritten Signature]
BENJAMIN RUEL S. KUIZON
 President / Authorized Representative

Witness:

[Handwritten Signature]
RICO A. MARIN
 BAC Chairman

[Handwritten Signature]
MARIA JAMELLAH CELESTE M. MAGALONA
 Chief, Accounting Unit

ACKNOWLEDGEMENT

REPUBLIC OF THE PHILIPPINES
 PROVINCE OF CEBU
 MUNICIPALITY OF MARAMAG

JAN 08 2020

CEBU CITY

BEFORE ME, a Notary Public for in the above jurisdiction, on this _____ day of _____ at _____ personally appeared the following, exhibiting to me following described Competent Evidence of Identity (CEI) in accordance with the 20m Rules on Notarial Practice.

Name	Competent Evidence of Identity	Date/place Issued
JESUS ANTONIO G. DERJE		
BENJAMIN RUEL S. KUIZON		

Known to me to be the same person who executed the foregoing instrument and who acknowledge to me that the same is their free and voluntary act and deed.

This instrument refers to the Contract of Agreement consisting of (3) pages including this page, signed by the parties and their witnesses on each and every hereof and thereof, including this page whereon the acknowledgement is written.

JAN 08 2020

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed on every page hereof my notarial seal this _____ day of _____ in the Municipality of _____

CEBU CITY CEBU CITY

DOC. NO. 72
 PAGE NO. 16
 BOOK NO. 14
 SERIES OF 10

[Handwritten Signature]
ATTY. PAUL L. PATUAL
 NOTARY PUBLIC CEBU CITY
 UNTIL DEC. 31, 2020
 PTR NO. 1985190/1-3-2020
 ROLL NO. 94641
 NOTARY COMM. 0121
 LIFETIME NO. 07936
 OFF. D. JAKO SALEM ST. CEBU CITY
 BAYANINAN BLDG. 1ST FL. OF CEBU
 MCLE COMPLIANCE V. 005073



NOTICE TO PROCEED

BENJAMIN RUEL S. KUIZON
Manager
FIRST BAY PHARMA DISTRIBUTOR
PhilGEPS Registration No. 2007-38200
#8 Osmena Village M, L Quezon Ave.
Maguikay, Mandaue City

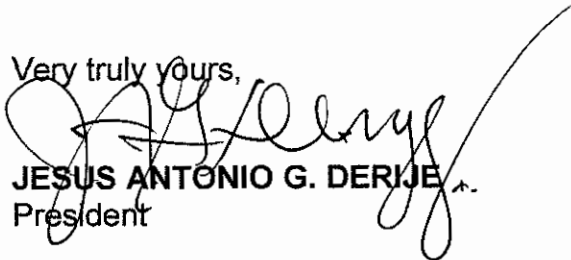
Dear Madam/Sir:

The attached Agreement having been approved, notice is hereby given to **FIRST BAY PHARMA DISTRIBUTOR** for the **PROCUREMENT OF DRUGS & MEDICINES, MEDICAL & LABORATORY SUPPLIES**, may commence after receipt of this notice but not to exceed sixty (60) calendar days.

Upon receipt of this notice, you are responsible for performing the services under the terms and conditions of the Agreement and in accordance with the Implementation Schedule.

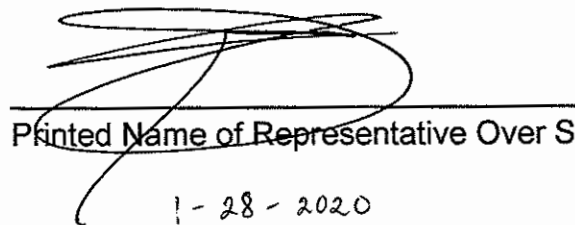
Please acknowledge receipt and acceptance of this notice by signing both copies in the space provided below. Keep one copy and return the other to the Bids and Awards Office.

Very truly yours,



JESUS ANTONIO G. DERIJE, Jr.
President

Conformed:



Printed Name of Representative Over Signature

Date

1 - 28 - 2020