



Republic of the Philippines
CITY GOVERNMENT OF MUNTINLUPA
Bids and Awards Committee

NOTICE TO PROCEED

SGS HEALTHCARE CO.
Bacoor, Pampanga

Dear Sir / Madame:

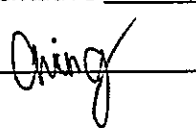
The attached Contract Agreement having been approved, notice is hereby given **SGS HEALTHCARE CO.** that the CONTRACT of the City Government of Muntinlupa for the "**Supply & Delivery of Dialysis Solution to be used by OSMUN**", shall commence effective FIVE (5) DAYS after acknowledging receipt hereof.

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

Please acknowledge receipt and acceptance of this notice by signing both copies on the space provided below. Kindly keep one (1) copy and return the other copy to the Bids and Awards Committee Secretariat.

Very truly yours,


Hon. **ROZZANO RUFINO B. BIAZON**
City Mayor

I acknowledge receipt of this Notice on APRIL 11, 2024
Name of the Bidder or Representative JOYCEE ANN CHING
Authorized signature 

Contract Agreement

THIS AGREEMENT made the MAR 26 2024 day of 20 between **CITY GOVERNMENT OF MUNTINLUPA** of the Philippines (hereinafter called "the Entity") of the one part and **SGS HEALTHCARE CO.** with address at Bacoor Cavite (hereinafter called "the Supplier") of the other part;

WHEREAS, the Entity invited Bids for certain goods and ancillary services, particularly for the **Supply & Delivery of Dialysis Solution to be used by OSMUN** and has accepted a Bid by the Supplier for the supply of those goods and services in the sum of **One Million Six Hundred Sixty Four Thousand Eight Hundred Thirty Six Pesos & 40/100 (P1,664,836.40)** (hereinafter called "the Contract Price").

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 as required by the 2016 revised Implementing Rules and Regulations of Republic Act No. 9184 shall be deemed to form and be read and construed as integral part of this Agreement, *viz.*:
 - i. Philippine Bidding Documents (PBDs);
 - I. Schedule of Requirements;
 - ii. Technical Specifications;
 - iii. General and Special Conditions of Contract; and
 - iv. Supplemental or Bid Bulletins, if any
 - ii. Winning bidder's bid, including the Eligibility requirements, Technical and Financial Proposals, and all other documents or statements submitted;

Bid form, including all the documents/statements contained in the Bidder's bidding envelopes, as annexes, and all other documents submitted (*e.g.*, Bidder's response to request for clarifications on the bid), including corrections to the bid, if any, resulting from the Procuring Entity's bid evaluation;
 - iii. Performance Security;
 - iv. Notice of Award of Contract; and the Bidder's conforme thereto; and
 - v. Other contract documents that may be required by existing laws and/or the Procuring Entity concerned in the PBDs. **Winning bidder agrees that additional contract documents or information prescribed by the GPPB that are subsequently required for submission after the contract execution, such as the Notice to Proceed, Variation Orders, and Warranty Security, shall likewise form part of the Contract.**

3. In consideration for the sum of **One Million Six Hundred Sixty Four Thousand Eight Hundred Thirty Six Pesos & 40/100 (P1,664,836.40)** or such other sums as may be ascertained, **SGS HEALTHCARE CO.** agrees to the **Supply & Delivery of Dialysis Solution to be used by OSMUN** in accordance with his/her/its Bid.
4. The City Government of Muntinlupa agrees to pay the above-mentioned sum in accordance with the terms of the Bidding.

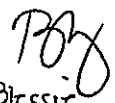
IN WITNESS whereof the parties hereto have caused this Agreement to be executed in accordance with the laws of the Republic of the Philippines on the day and year first above written.



Hon. ROZZANO RUFINO B. BIAZON
 City Mayor


 JOYCEE ANN CHING
 Supplier

for:
CITY GOVERNMENT OF MUNTINLUPA

for:
SGS HEALTHCARE CO.


 Belinda Blessie Macagaya

Signed in the presence of:

 IRENE MABANDA

ACKNOWLEDGEMENT

REPUBLIC OF THE PHILIPPINES)
 CITY OF MUNTINLUPA)

MAR 26 2024

BEFORE ME, a Notary Public for and in Muntinlupa City, this ___ day of _____, 2024, personally appeared:

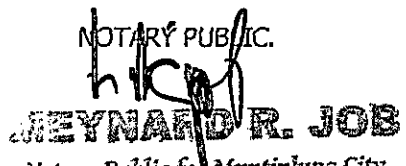
NAME
 Hon. ROZZANO RUFINO B. BIAZON
 Joycee Ann Ching

GOVERNMENT ISSUED ID NO.
 Driver's License N03-86-030998
 011-9360086-6

Known to me and to me known to be the same persons who executed the foregoing instrument and acknowledged to me that the same is their own voluntary act and deed.

WITNESS MY HAND SEAL.

Doc. No. 101.
 Page No. 22.
 Book No. XVI
 Series of 2024.


NEYNARD R. JOB
 Notary Public for Muntinlupa City
 Notarial Commission No. 23-809
 Until December 31, 2024
 IR No. 10474121 / Jan. 02, 2024- Muntinlupa City
 IBP Lifetime No. 014640 / Jan. 04, 2015
 Roll No. 49786 / PPLM
 MCLE Compliance No. VII-3016417 / April 26, 2022
 2731-C Bragor Street, Bragor Subdivision,
 Putatan, Muntinlupa City



REPUBLIC OF THE PHILIPPINES
Unified Multi-Purpose ID



CRN-0111-9360086-5



Chief

SURNAME

CHING

GIVEN NAME

JOYCEE ANN

FAMILY NAME

RAMOS

SEX F DATE OF BIRTH 1994/10/27

ADDRESS

168 LIBIS ESPINA ST BRGY

14 DISTRICT 2 CALOOCAN

CITY NCR PHL 1400



REPUBLIC OF THE PHILIPPINES
 DEPARTMENT OF TRANSPORTATION
 LAND TRANSPORTATION OFFICE
 NON-PROFESSIONAL DRIVER'S LICENSE



Last Name, First Name, Middle Name
BLAZON, ROZANO RUFINO BUNOAN
 Nationality Sex Date of Birth Weight (kg) Height (m)
 PHIL M 1969/03/20 103 1.77

Address
 219 TAAL ST AYALA ALABANG VILLAGE,
 1110 HIGUERA CITY

License No. Expiration Date Agency Code
 1402-B4-030998 2023/03/20 1143

Sex of Eyes Eye Color
 M BROWN

Sex of Hair Hair Color
 M BLACK BLACK

[Signature]
 Signature of Licensee

[Signature]
 EDGAR C. ALVARADO
 Assistant Secretary

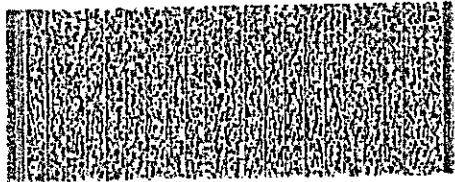
THIS LICENSE IS VALID FOR THE FOLLOWING VEHICLE CATEGORIES:

- 1. MOTORCYCLE (CLASSIFICATION 1)
- 2. MOTORCYCLE (CLASSIFICATION 2)
- 3. MOTORCYCLE (CLASSIFICATION 3)
- 4. MOTORCYCLE (CLASSIFICATION 4)
- 5. MOTORCYCLE (CLASSIFICATION 5)
- 6. MOTORCYCLE (CLASSIFICATION 6)
- 7. MOTORCYCLE (CLASSIFICATION 7)
- 8. MOTORCYCLE (CLASSIFICATION 8)
- 9. MOTORCYCLE (CLASSIFICATION 9)
- 10. MOTORCYCLE (CLASSIFICATION 10)
- 11. MOTORCYCLE (CLASSIFICATION 11)
- 12. MOTORCYCLE (CLASSIFICATION 12)
- 13. MOTORCYCLE (CLASSIFICATION 13)
- 14. MOTORCYCLE (CLASSIFICATION 14)
- 15. MOTORCYCLE (CLASSIFICATION 15)
- 16. MOTORCYCLE (CLASSIFICATION 16)
- 17. MOTORCYCLE (CLASSIFICATION 17)
- 18. MOTORCYCLE (CLASSIFICATION 18)
- 19. MOTORCYCLE (CLASSIFICATION 19)
- 20. MOTORCYCLE (CLASSIFICATION 20)



Serial Number
 057291296

IN EMERGENCY CONTACT:
 I WILL NOTICED BY ANY ORGAN
 IN CASE OF EMERGENCY NOTIFY
 ADDRESS SAME ADDRESS
 TEL. NO. 02-77231119



[Handwritten signature]

[Handwritten signature]

[Handwritten signature]

PURCHASE ORDER
City Government of Muntinlupa

Supplier : SGS HEALTH CARE CO. P.O. No.: 31464
 Address : Makati City Date : April 01, 2024
 Mode of Procurement : BIDDING

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

Place of delivery : _____ Delivery Term : _____
 Date of delivery : _____ Payment Term : _____

Item No.	Quantity	Unit	Description	Unit Cost	Amount
1	5,680	gal	Hemodialysis Acid Concentrate Solution , 5 L/gal	247.50	1,405,800.00
2	2,840	pack	Hemodialysis Bicarbonate Powder Concentrate, (840g/pack) Nothing follows...	91.21	259,036.40
*** To be Used by OSMUN. ***					

Total Amounts in Words: _____ **1,664,836.40**

In case of failing to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed.

Confirmer: JOYCEE CHING
 Signature over printed name
April 11 2024
 Date

Very Truly yours,
Mayo ROZZANO RUFINO B. BIAZON
 Authorized Official

(In case of Negotiated Purchase pursuant to Section 369 (a) of RA7160 this portion must be accomplished)
 Approved to be purchased thru Negotiated Purchas per Sangguniang Res. No.: _____
 Certified Correct: _____
 Secretary of the Sanggunian

Requesting Office/Dept. _____
 Authorized Official

Funds Available : _____
 Amount: _____
 R.O. No.: _____
 Chief Account

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4/4/24