

Republic of the Philippines
LOCAL GOVERNMENT UNIT OF GUBAT
Manook St., Gubat, Sorsogon

Notice of Award


February 03, 2023

CECIL H. DECHAVEZ
3B DECHAVEZ VARIETY STORE
San Roque Bacon District Sorsogon City

Dear Madam:

We are happy to notify you that your Bid dated January 16, 2023 on execution of the **Anti-rabies vaccine and supplies for mass anti-rabies vaccination on March - June 2023 with reference no. PR 420**, for the Contract Price of equivalent to **ONE HUNDRED NINETY-SIX THOUSAND FIVE HUNDRED PESOS (Php196,500.00)**, as corrected and modified in accordance with the Instructions to Bidders is hereby accepted.

Very truly yours,


RONNEL U. LIM
Municipal Mayor

Conforme:


CECIL H. DECHAVEZ
3B DECHAVEZ VARIETY STORE
Date: _____

Republic of the Philippines
LOCAL GOVERNMENT UNIT OF GUBAT
Manook St., Gubat, Sorsogon

NOTICE TO PROCEED

February 10, 2023

CECIL H. DECHAVEZ
3B DECHAVEZ VARIETY STORE
San Roque Bacon District Sorsogon City


Dear Madam:

The attached Contract Agreement having been approved; notice is hereby given to **3B DECHAVEZ VARIETY STORE**, that work may commence on **Anti-rabies vaccine and supplies for mass anti-rabies vaccination on March - June 2023 with reference no. PR 420** effectively after the receipt of this notice.

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 Local Government Unit of Gubat.

Very truly yours,


RONNEL U. LIM
Municipal Mayor

I acknowledge receipt of this Notice on _____

Name of the Representative of the Bidder: **CECIL H. DECHAVEZ**

Authorized Signature:  _____

PURCHASE ORDER (SF-GOOD-58)
Local Government Unit - Gubat, Sorsogon

420

Supplier : 3B DECHAVEZ VARIETY STORE (DISTRIBUTOR)	P.O. No. : <u>1785</u>
Address : Bacon District, Sorsogon City	Date : _____
E-mail Address : _____	Mode of Procurement
Telephone No. : _____	Small Value Procurement (NP)
TIN : _____	

Gentlemen:

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

Place of Delivery : <u>LGU-Gubat</u>	P.O. No. : _____
Date of Delivery : _____	Date : _____

Stock No.	Unit	DESCRIPTION	QTY.	Unit Cost	Amount
1	vial	Anti-rabies Vaccines (10mL per vial) Expiration date should be at least until June 2026 ()	400	480.00	192,000.00
2	box	Disposable Syringe (3mL) ()	5	450.00	2,250.00
3	box	Latex examination gloves (medium) ()	5	450.00	2,250.00

ONE HUNDRED NINETY SIX THOUSAND FIVE HUNDRED PESOS ONLY

196,500.00



In case of 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.

Very truly yours,

Conforme;

3B DECHAVEZ VARIETY STORE

Signature over printed name of Supplier

Date

RONNEL U. LIM
Municipal Mayor

Funds Available:

AVA E. OBRIOUE

ALOBS. No. : _____