

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

**Notice of Award**

September 6, 2023

**MS. ROSE CINDIC A. ERESTAIN**  
UNIMEDS DRUGSTORE  
Brgy. Macabog, West District  
Sorsogon City


Dear Madam:

We are happy to notify you that your Bid dated September 01, 2023 or execution of the **Latex Gloves for Dental services use with reference no. PR 1214**, for the Contract Price of equivalent to **SIXTY-ONE THOUSAND SIX HUNDRED EIGHTY-NINE & 60/100 PESOS (Php61,689.60)** as corrected and modified in accordance with the Instructions to Bidders is hereby accepted.

Very truly yours,

  
**RONNEL U. LIM**  
Municipal Mayor

Conforme:

  
**ROSE CINDIC A. ERESTAIN**  
UNIMEDS DRUGSTORE  
Date: \_\_\_\_\_

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

**NOTICE TO PROCEED**

September 8, 2023

**MS. ROSE CINDIC A. ERESTAIN**  
UNIMEDS DRUGSTORE  
Brgy. Macabog, West District  
Sorsogon City


Dear Madam:

The attached Contract Agreement having been approved; notice is hereby given to **UNIMEDS DRUGSTORE**, that work may commence on the **Latex Gloves for Dental services use with reference no. PR 1214** 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.

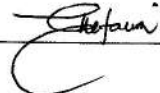
Please acknowledge receipt and acceptance of this notice by signing both copies in the space provided below. Keep one copy and return the other to the Local Government Unit of Gubat.

Very truly yours,

  
**RONNEL U. LIM**  
Municipal Mayor

I acknowledge receipt of this Notice on \_\_\_\_\_

Name of the Representative of the Bidder: **ROSE CINDIC A. ERESTAIN**

Authorized Signature:  \_\_\_\_\_

Supplier	: <b>UNIMEDS DRUGTORE</b> (/)	P.O. No.	: <b>2207</b>
Address	: <b>SORSOGON CITY</b>	Date	:
E-mail Address	:	Mode of Procurement	:
Telephone No.	:	<b>Small Value Procurement (NP)</b>	
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	boxes	Latex Gloves small (100pcs per box) ()	56	275.40	15,422.40
2	boxes	Latex Gloves medium (100pcs per box) ()	56	275.40	15,422.40
3	boxes	Latex Gloves large (100pcs per box) ()	112	275.40	30,844.80

**SIXTY ONE THOUSAND SIX HUNDRED EIGHTY NINE PESOS & 60/100**

**61,689.60**

*[Handwritten signature]*

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,

*[Signature]*  
**BONNEL U. LIM**  
Municipal Mayor

Conforme;

*[Signature]*  
**UNIMEDS DRUGTORE**  
Signature over printed name of Supplier

Date

Funds Available:

**AVA E. OBRIQUE**  
Municipal Accountant

ALOBS. No. :  
Amount :