



PURCHASE ORDER

Supplier : **LIFELINE DIAGNOSTICS SUPPLIES INC.**

P.O. Number: **2023124972**

Address : **QUEZON CITY**



O202312497207FEDB83F

PhilGEPS Registration No. : **2003101887196914976**

Date : **Nov 30, 2023**

Tel./Fax No. : **09483700654**

P.R. No. : **2023106241**

Registration Certificate : **DTI**

Procurement mode: **Competitive Bidding**

Req. Office : **PEEDO - DDN Blood Center**

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

Date of Delivery : _____ Payment Term : **ON ACCOUNT**

Delivery Term: **15 Calendar Days**

Place of Delivery : **PEEDO DAVNOR BLOOD CENTER**

I.N.	Quantity/Unit	Item	Unit Cost	Amount
1	3.00 KITS	MONOLISA HBsAg ULTRA; 480T <ul style="list-style-type: none"> • Micro plate strips (Coated with monoclonal anti-HBs antibodies) • Concentrated washing solution • Negative control • Positive control • Conjugate diluent • Conjugate (Mouse monoclonal anti-HBs antibodies and goat polyclonal anti-HBs antibodies bound to the peroxidase. Lyophilized.) • Substrate buffer • Chromogen: TMB solution • Stopping solution BIO-RAD	40,600.00	121,800.00
2	2.00 KITS	MONOLISA HCV Ag/Ab ULTRA V2; 480T <ul style="list-style-type: none"> • Micro plate strips (Coated with monoclonal anti-capsid antibody of the HCV, purified recombinant hepatitis C antigens NS3, NS4 and a HCV capsid peptide) • Concentrated washing solution • Negative control • Antibody Positive control (Human serum containing antibodies to HCV) • Antigen positive control (Antigen positive control synthetic containing a lyophilized capsid peptide) 	135,000.00	270,000.00

FOR USE OF PEEDO DAVNOR BLOOD CENTER

In case of failure 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.

I hereby conform that NOTICE TO DELIVER shall be served to the PLACE OF DELIVERY stated herein three (3) days before the actual delivery of the Item/s covered by this Purchase Order.

Conforme :

Noel Villavosa Jr.
 (Signature over printed name)
 12/27/23
 (Date)

Very truly yours,
 By the Authority of the Governor*

ENGR. JOGIE JEAN R. RABINOZ, CE, MPA, EnP
 Provincial Administrator


EDWIN I. JUBAHIB
 Governor

NOTE: This is an important paper and will cause great inconvenience if lost. Claim for payment from the Provincial Treasurer supported by this form to be attached to the voucher.

ALEJANDRO R. OMILA JR.



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Req. Office : PEEDO - DDN Blood Center	

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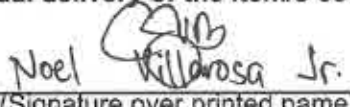
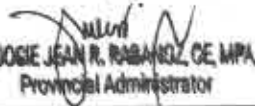
Date of Delivery : _____ Payment Term : ON ACCOUNT Place of Delivery : PEEDO DAVNOR BLOOD CENTER	Delivery Term: 15 Calendar Days
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I.N.	Quantity/Unit	Item	Unit Cost	Amount
		<ul style="list-style-type: none"> • Antigen diluent • Conjugate 1 (Mouse biotinilated monoclonal antibodies against capsid HCV antigen) • Conjugate 2 (Mouse antibodies directed against human IgG/peroxidase and streptavidin/peroxidase) • Substrate buffer • Chromogen: TMB solution • Stopping solution BIO-RAD		
3	3.00 KITS	GENSCREEN ULTRA HIV Ag/Ab; 840T <ul style="list-style-type: none"> • Micro plate strips (coated with monoclonal antibodies to P24 HIV-1 (mouse) and purified HIV-1 and HIV-2 antigens) • Concentrated washing solution • Negative control • Antibody Positive control (Human plasma positive for anti-HIV-1 antibodies) • Antigen positive control (Purified HIV-1 antigen inactivated) • Conjugate 1 (Biotinylated polyclonal antibodies to P24 HIV-1 sheep) • Conjugate 2 (Lyophilised peroxidase labelled Streptavidin and purified HIV-1 and HIV-2 antigens) • Conjugate diluent • Substrate buffer • Chromogen: TMB solution 	45,000.00	135,000.00

FOR USE OF PEEDO DAVNOR BLOOD CENTER

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Conforme :  _____ (Signature over printed name) _____ 12/27/23 (Date)	Very truly yours, By the Authority of the Governor  ENGR. JOGIE JEAN R. RABANOZ, CE, MPA, EnP Provincial Administrator
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EDWIN I. JUBAHIB
Governor

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ALEJANDRO R. OMILA JR.



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I.N.	Quantity/Unit	Item	Unit Cost	Amount
		<ul style="list-style-type: none"> • Stopping solution BIO-RAD, 480T 		
4	1.00 KIT	TREPSURE; 960 T <ul style="list-style-type: none"> • Micro plate strips (coated with specific recombinant treponemal antigens) • Concentrated washing solution • Negative control (Human) • Calibrator (Human) • Positive control (Human) • Conjugate (Conjugated with specific recombinant treponemal antigens) • Substrate • Stopping solution TRINITY BIOTECH	62,000.00	62,000.00

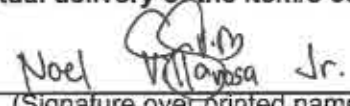
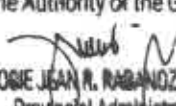
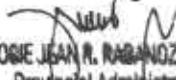
Remarks :
TERMS & CONDITIONS:

1. All reagents should be compatible with the tie-up EIA micro plate analyzer.
2. Controls, Calibrators and other Accessories must be included.
3. Must have proven good track records and have more than 30 installations to different major blood banks / blood centers nationwide.
4. Must be included in the list of test kits as to the guidance for referral of blood sample for confirmatory set by NRL-NVBSP (Department Circular No. 2012-0198).
5. Local Distributor must be ISO 9001>2008 Certified.
6. Distributor must do repairs and routine maintenance of the EIA machine.
7. All costs of parts and labor for wear and tear of the EIA machine will be on the account of the Distributor.
8. The Distributor shall train the operator of the machine (medical technologists) on how to:

FOR USE OF PEEDO DAVNOR BLOOD CENTER	
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I.N.	Quantity/Unit	Item	Unit Cost	Amount
<ul style="list-style-type: none"> - Operate the instrument on a daily basis - Set up an initiate an assay run - Handle / store kits - Operate the software - Properly maintain the machine - Result interpretation - Troubleshooting 				

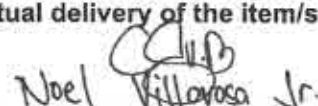

NOTE:
 -ALL DELIVERIES OF SUPPLIES MUST BE AT LEAST 1 YEAR OR MORE TO ITS EXPIRY DATE.
 -REAGENTS CLARIFICATION/SPECIFICATION REFER TO R.O.

The award is based on Abstract No. **1120234337** created on **November 14, 2023** and resolved on **November 30, 2023** under Quotation No. **B20235412** opened on **November 13, 2023**

FOR USE OF PEEDO DAVNOR BLOOD CENTER	
Grand Total Amount in Words : FIVE HUNDRED EIGHTY-EIGHT THOUSAND EIGHT HUNDRED AND XX / 100	GRAND TOTAL : ₱ 588,800.00

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