



Republic of the Philippines  
Department of Health  
National Capital Regional Office  
**VALENZUELA MEDICAL CENTER**  
Padrigal St., Karuhatan, Valenzuela City  
Telefax No. 294-4625

FM-PROC-024  
Rev 0 - 07/20/18

## CONTRACT AGREEMENT

CONTRACT AGREEMENT NO.: 25-03-003  
DATE : March 20, 2025  
Mode of Procurement: Lease of Real Property and Venue

TO: **HOTEL LUCKY CHINATOWN, INC.** AUTHORITY FOR WORK ORDER:  
21 Reina Regente St. Brgy. 293, Binondo, Manila

(1) Completion time from the date this work order received by the Contractor/Supplier/Consultant on March 27-28, 2025.

(2) PARTICULARS: Conduct of Good Clinical Practice Training

ITEM NO.	WORK TO BE DONE	120	pax	1,100.00	TOTAL PRICE
1	<b>Meals and Venue (LIVE-OUT)</b> <b>TITLE:"CONDUCT OF GOOD CLINICAL PRACTICE TRAINING"</b> <b>DATE:</b> March 27-28, 2025 ( <i>P1,100.00 x 60 pax x 2 days</i> ) <b>TIME:</b> (8:00am-6:00pm) <u>Specifications:</u> *Use of Function room based on meal provision *Use of LCD Screen Projector *Basic Sound System with 2 Microphones *White Board with Markers and Pen *Plasma / Welcome Signage *5 Complimentary Parking *One Round of Iced Tea *With Free-Flowing Coffee & Tea Service *2 Days for 1 Van Shuttle – VMC-HLC   HLC-VMC *1 Overnight Stay Room accommodation with Breakfast for 2 good *Free WIFI Connection <small>VALENZUELA MEDICAL CENTER</small> <small>ACCOUNTING SECTION</small>				<b>132,000.00</b>

**RECEIVED**  
20 MAR 2025  
TIME: 11:00

Nothing Follows  
PR No. 25-03-355 dated March 6, 2025  
Resolution No. 2025-107 dated March 19, 2025  
NOA dated March 20, 2025  
Lease of Real Property and Venue  
One Hundred Thirty Two Thousand Pesos Only

**132,000.00**

PURPOSE Conduct of Good Clinical Practice Training

(3) REQUISITIONER:	(4) FUNDS AVAILABLE:	Maintenance & Other Operating Expenses
<u>MARIA MILAGROS U. MAGAT, MD, FPPS, FPAPP, MEM</u> Signature over Printed Name Hospital Training Officer	<u>RAYMUND JOE B. MACUANA</u> Signature over Printed Name Accountant III	OS NO. <u>25-03-323</u> AMOUNT <u>132,000</u>

(5) THIS IS TO CERTIFY THAT the plans and specification and scope of work are of Government Standard and that the price as indicated on the Abstract of Canvass and supported by the Canvass Proposals is fair and reasonable as offered to this office.

I FURTHER CERTIFY that this procurement is for the benefit of the VALENZUELA MEDICAL CENTER.

Recommending Approval:

ENGR. ZORAIDA S. CUADRA

Signature Over Printed Name

OIC-Hospital Operations and Patient Support Division

(7) Received work order and bind myself to conditions as specified in paragraphs (1) & (2) above  SUBJECT TO REFUND UPON DISALLOWANCES MADE TO THE COMMISSION ON AUDIT CONFORME RECEIVED BY THE SUPPLIER REPRESENTATIVE DATE	(6) APPROVAL (SEC.2048 Admin Code) <u>E. Cava</u> MAR 21 2025 <u>EDILBERTO V. CAVANEYRO, MD, MHA, FPPCS, FPSGS</u> Signature over Printed Name OIC-Medical Center Chief II
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Date Received \_\_\_\_\_  
 Amount of Performance Bond \_\_\_\_\_  
 Bond Nr/Bonding Co. (If Sure Bond) \_\_\_\_\_