



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-010
Rev 2 - 03/15/17

JOB ORDER

JOB ORDER NO.: 25-03-029
DATE: March 7, 2025
Mode of Procurement: Small Value Procurement

TO: **RESPICARE ENTERPRISES INC.** AUTHORITY FOR WORK ORDER:
Narciso Bldg. II, 23 Fisheries Street, Brgy Varsa, Quezon City

(1) Completion time from the date this work order to received by the Contractor/Supplier: 60 CD
(2) PARTICULARS: Replacement of Accessories of Anesthesia Machine Compatible to Brand/Model : Mindray/A9

ITEM NO.	WORK TO BE DONE				TOTAL PRICE
	Replacement of Accessories for ANESTHESIA MACHINE compatible to Brand: MINDRAY/A9 SN: AG4-1B000332				
1	Preventive Maintenance Kit (A9 Advanced)	1	pc	43,000.00	43,000.00
2	Oxygen Sensor	1	pc	19,000.00	19,000.00
	Cleaning and Calibration Calibration Verification -FUNCTIONALITY TESTING Completion of Delivery: 60 calendar days upon receipt of approved Job Order				
	PR No. 25-02-241 dated February 13, 2025 NOA dated 3/5/2025 Resolution No. 2025-084 dated 02/28/2025 Allocation: EFMS Small Value Procurement ***** Nothing Follows *****				
	SIXTY TWO THOUSAND PESOS ONLY				62,000.00

PURPOSE Replacement of Accessories of Anesthesia Machine Compatible to Brand/Model : Mindray/A9

(3) REQUISITIONER: Engr. GERARDO E. LINGAT
Signature over Printed Name
Engineer III, EFMS
(4) FUNDS AVAILABLE: RAYMUND JOE B. MACUANA
Signature over Printed Name
Accountant III

(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.
(6) In case of failure to make the completion time of work order within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed
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)
MAR 13 2025
EDILBERTO V. CAVANEYRO, MD, MHA, FPCS, FPSGS
Signature over Printed Name
OIC-Medical Center Chief II