



**NOTICE OF AWARD**

MAY 09 2024

**PERMAHEAL ENTERPRISE**

Herrera St., Miputak,  
Zamboanga Del Norte

Madam/Sir:

This is to advise you that your bid dated **April 16, 2024** for **PR 24-03-111; Small Value Procurement of Supply and Delivery of Various Medicine for the Dental Clinic of the University**, with a following Contract Price is hereby accepted;

| Object of Bidding  | Total Amount in Figures | Amount in Words  |
|--|-------------------------|--|
| <b>3.) Five (5) boxes of Citirizine 10mg, 100 pcs/box</b>                          | Php 385.00              | Three Hundred Eighty-Five Pesos                            |
| <b>4.) Ten (10) bottles of Ethyl Alcohol, 70%, 500ml</b>                           | Php 1,056.00            | One Thousand Fifty-Six Pesos                               |
| <b>9.) Ten (10) boxes of Disposal Surgical Mask, 3 ply w/ear loops, 50 pcs/box</b> | Php 1,496.00            | One Thousand Four Hundred Ninety-Six Pesos                 |
| <b>14.) Ten (10) boxes of Oral Antiseptic Solution, Povidone 1%, 50 ml/bot</b>     | Php 3,498.00            | Three Thousand Four Hundred Ninety-Eight Pesos             |
| <b>20.) Twenty (20) boxes of Co-Amoxiclav, 625mg, 14 pcs/box</b>                   | Php 4,620.00            | Four Thousand Six Hundred Twenty Pesos                     |
| <b>22.) Ten (10) boxes of Paracetamol Tablet, 500mg</b>                            | Php 880.00              | Eight Hundred Eighty Pesos                                 |
| <b>TOTAL CONTRACT PRICE</b>  | <b>Php 11,935.00</b>    | <b>Eleven Thousand Nine Hundred Thirty-Five Pesos Only</b> |

Please affix your signature in the space provided below as an indication of your acceptance of the award.

Very truly yours,

**MA. CARLA A. OCHOTORENA, RN., Ph.D.**  
President

Received by:

\_\_\_\_\_  
(Signature Over Printed Name)

Date: \_\_\_\_\_