



## SUPPLEMENTAL/BID BULLETIN No. 2

Title	:	SUPPLY AND DELIVERY OF GO BAG FOR DSWD CENTRAL OFFICE EMPLOYEEs
ITB No.	:	GOP/21-DSWD-019
Date	:	13 October 2021

This Supplemental/Bid Bulletin is issued to all prospective Bidders announcing amendment/ changes in the Bidding Documents to wit:

## A. Medicine Kit

PARTICULARS	FROM	то	
Anti-Hypertensive Drug with MC4	Anti-Hypertensive Drug with MC4	Anti-Hypertensive Drug	
Paracetamol 500g + 100g Nimesulide	Paracetamol 500g + 100g Nimesulide Paracetamol 500g		

B. License to Operate as manufacturer or a Certification as distributor, wholesaler or reseller from the Food and Drug Administration.

PARTICULARS	FROM	то
License to Operate (LTO) or Certification from Food and Drug Administration (FDA)	License to Operate are required only for Food, Medicine <b>and</b> Medical Supplies	License to Operate are required only for Food, Medicine <b>and/or</b> Medical Supplies

## C. Deadline for the Submission and Receipt of Bids:

The schedule for the submission and receipt of bids is moved from 13 October 2021 to 20 October 2021 at 9:00 a.m. Bids must be delivered to the BAC Secretariat Office, 2<sup>nd</sup> floor, Mahusay Building, DSWD Central Office. Late bids will not be accepted.

The bid opening will immediately follow after the submission and receipt of bids, to be hold at Procurement Management Service Conference Room, 2<sup>nd</sup> floor, Mahusay Building, DSWD Central Office, IBP Road, Constitution Hills, Quezon City.

D. Issuance of Bidding Documents:

The issuance of bidding documents is extended until 20 October 2021 at 8:00 a.m.

This bid bulletin shall form part of the bidding documents.

## ORIGINAL SIGNED NOEL M. MACALALAD Assistant Secretary and Chairperson, Bids and Awards Committee

Please accomplish the portion below and send it to facsimile no. (02) 951-7116 or email at <u>bacsec@dswd.gov.ph</u>.

Received from DSWD, Supplemental/Bid Bulletin No. 2 for the Supply and Delivery of Go Bag for DSWD Central Office Employees (ITB No. GOP/21-DSWD-019);

RECEIVED BY	: _	(SIGNATURE OVER PRINTED NAME)	DATE:	
DESIGNATION	: _			
COMPANY	:			