



Republic of the Philippines  
Department of Health  
NORTHERN MINDANAO MEDICAL CENTER  
Capitol Compound, Cagayan de Oro City

COMMITTEE ON AWARD FORM NO. 2

This is to certify that I have received from the Canvasser of the Northern Mindanao Medical Center, Cagayan de Oro City

Quotation No.: 201223-01 12/23/2020 at NMMC.  
20-0479|20-0480 (Date)

NAME OF BIDDERS	SIGNATURE OF BIDDERS	DATE RECEIVED	DATE RETURNED	RECEIVED BY

I hereby certify that I delivered

Quotation No.: 201223-01  
PR No.: 20-0479|20-0480  
BAC Resolution No. BR-970 s. 2020

\_\_\_\_\_  
Canvasser