

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

210430-1
MS-21-0644

04/30/2021
(Date)

at NMMC.

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

I hereby certify that I delivered

Quotation No.: 210430-1
PR No.: MS-21-0644
BAC Resolution No. BR-595 s.2021

Canvasser