

NOTICE TO PROCEED

MEDOCARE HEALTH SYSTEMS, INC. EU State Tower, #30 Quezon Avenue, Quezon City, Metro Manila

Dear Sir/Madam:

Notice is hereby given to your office to commence the process for the Health / Medical Insurance (including dental).

Upon receipt thereof, you are responsible in the execution of the supply and delivery of the item/s under the terms and conditions of the contract and in accordance with the delivery term.

Please acknowledge receipt and acceptance of this notice by signing both copies in the space provided below. Keep one (1) copy and return the other to the Philippine Council for Health Research and Development (PCHRD).

Very truly yours,

JAIME C. MONTOYA, MD, MSc., PhD, CESO II

Executive Director

Tel. Nos.: (02) 8-837-7534 to 37; (02) 8-837-0031; (02) 8-837-0087;

(02) 8-837-2924; (02) 8-837-2931

Fax. No.: (02) 8-837-2942