



Republic of the Philippines

**PHILIPPINE HEALTH INSURANCE CORPORATION**

**Philhealth Regional Office VI**

Majestic Plaza Bldg., #15 J. de Leon St., Iloilo City

Tel. No. (033) 508-7302, Fax no. (033) 508-7302, [region6@philhealth.gov.ph](mailto:region6@philhealth.gov.ph)



## NOTICE TO PROCEED

September 3, 2012

**MR. HOMER A. CONCHADA**

Proprietor

HLYC Trading

1133 Aguilar St., Sta. Cruz, Manila

Dear Sir:

The attached Contract Agreement for **INFORMATION TECHNOLOGY EQUIPMENT and SOFTWARE** having been approved on September 3, 2012, notice is hereby given to **HLYC TRADING** effective upon receipt of said Agreement.

Upon receipt of this notice, you are responsible for performing the services under the terms and conditions of the Agreement and in accordance with the Implementation Schedule.

Please acknowledge receipt and acceptance of this notice by signing both copies in the space provided below.

We look forward to a strong partnership with you.

Very truly yours,

  
**DENNIS S. MAS, PhD URP**

RVP- PRO VI

I acknowledge receipt of this Notice on Sept. 3, 2012

Name of the representative of the Bidder: LAM ESPINOSA

Authorized Signature: 