



Republic of the Philippines  
Province of Guimaras

**OFFICE OF THE SANGGUNIANG PANLALAWIGAN**

*EXCERPTS FROM THE MINUTES OF THE REGULAR SESSION OF THE HONORABLE SANGGUNIANG PANLALAWIGAN OF THE PROVINCE OF GUIMARAS HELD AT THE SP SESSION HALL, PROVINCIAL CAPITOL ON JANUARY 06, 2016.*

*PRESENT:*

<i>Hon. Vicente B. de Asis</i>	-	<i>Vice Governor/Presiding Officer</i>
<i>Hon. Cyril C. Beltran</i>	-	<i>SP Member/ Majority Floor Leader</i>
<i>Hon. David G. Gano</i>	-	<i>SP Member/ Deputy Majority Floor Leader</i>
<i>Hon. John Edward G. Gando</i>	-	<i>SP Member</i>
<i>Hon. Josefina G. de la Cruz</i>	-	<i>SP Member</i>
<i>Hon. Dan Elby C. Habaña</i>	-	<i>SP Member</i>
<i>Hon. Diosdado G. Gonzaga</i>	-	<i>SP Member</i>
<i>Hon. Rex G. Fernandez</i>	-	<i>SP Member</i>
<i>Hon. Nelly S. Rentoy</i>	-	<i>Ex-Officio Member (PCL Fed. President)</i>
<i>Hon. Fred C. Gamayao</i>	-	<i>Ex-Officio Member (LNB President)</i>

*OFFICIAL BUSINESS:*

*None*

*ABSENT:*

<i>Hon. Roy P. Habaña</i>	-	<i>SP Member</i>
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**RESOLUTION NO. 02**

**RESOLUTION AUTHORIZING GOVERNOR SAMUEL T. GUMARIN, MD, MPH TO SIGN FOR AND IN BEHALF OF THE PROVINCIAL GOVERNMENT OF GUIMARAS, THE DEED OF DONATION WITH THE DEPARTMENT OF HEALTH (DOH) INVOLVING THE DONATION OF ONE (1) UNIT MOBILE DENTAL CLINIC FOR THE PROVINCE OF GUIMARAS**

*WHEREAS, as an initial response to improve dental health care coverage in the country, the Department of Health (DOH) has committed to provide a mobile dental clinic including equipment to the provinces;*

*WHEREAS, the Honorable Governor, in his letter dated 04 January 2016, has requested for an authority to sign for and in behalf of the provincial government, the Deed of Donation with the Department of Health involving the donation of One (1) Unit Mobile Dental Clinic for the Province of Guimaras;*

*WHEREAS, cognizant of the need for dental health facilities in the province, this Honorable Body interposes no objection on the request;*

*NOW THEREFORE, on motion of SP Member Hon. Josefina G. de la Cruz, Chairperson, Committee on Health, unanimously seconded:*

**THE SANGGUNIANG PANLALAWIGAN IN SESSION DULY ASSEMBLED:**

*RESOLVED, to authorize Governor Samuel T. Gumarin, M.D., MPH to sign for and in behalf of the Provincial Government of Guimaras, the following:*

## DEED OF DONATION

KNOW ALL MEN BY THESE PRESENTS:

The Deed of Donation is entered on the \_\_\_\_ day of \_\_\_\_ 2015 in Manila, Philippines, by the **DEPARTMENT OF HEALTH**, a National Government Entity duly organized and existing under the laws of the Republic of the Philippines, hereinafter referred to as "DOH", with office address at San Lazaro Compound, Rizal Avenue, Sta. Cruz, Manila, Philippines, herein represented by **JANETTE LORETO-GARIN, MD, MBA-H**, Secretary of Health, as the **DONOR**:

in favor of

The **PROVINCIAL GOVERNMENT OF** \_\_\_\_\_, a local government unit duly organized and existing under the laws of the Republic of the Philippines, hereinafter referred to as \_\_\_\_\_ with office address at \_\_\_\_\_ City, Philippines, hereinafter represented by **HON.** \_\_\_\_\_, Governor, as the **DONEE**.

In this Agreement, DOH and the Provincial Government of \_\_\_\_\_ are individually referred to as "Party" and collectively as "Parties."

## WITNESSETH:

**WHEREAS**, the State recognizes its mandate to provide equitable and accessible quality healthcare for all Filipinos;

**WHEREAS**, the Health Facility Enhancement Program (HFEPP) is one of the major pillars of "*Kalusugan Pangkalahatan*"

**WHEREAS**, "*Kalusugan Pangkalahatan*" envisions quality health care to be more accessible to the poor and vulnerable population by ensuring the availability of functional static and mobile health facilities, including mobile dental clinics;

**WHEREAS**, studies have shown that the ration of government dentist to population is one (1) dentist for every 48,000 to 50,000 and that the prevalence of dental diseases continue to be high starting at childhood;

**WHEREAS**, to address the lack of dentists who will serve the dental health needs of all the municipalities and cities in the country, the DOH is investing in the acquisition of mobile dental clinics, including equipment, to cover the unserved communities;

**WHEREAS**, in CY 2015, the DOH has committed to provide mobile dental clinics, including equipment, per province as an initial response to improve dental health care coverage in the country;

**WHEREAS**, the Provincial Government of \_\_\_\_\_ plays a critical role in ensuring administrative support to augment public dental health services in the country; and

**WHEREAS**, the Provincial Government of \_\_\_\_\_ shall provide the necessary health human resource and logistics support for the operation and maintenance of the mobile dental clinic.

**NOW THEREFORE**, in consideration of the foregoing premises and subject to the conditions stipulated hereunder, the Department of Health hereby donates to the Province of \_\_\_\_\_ one (1) unit mobile dental clinic, including equipment.

The Donee undertakes to:

1. Ensure that the mobile dental clinic is utilized in accordance with its purpose.
2. Ensure the availability of dentists and other health personnel, drugs, medicines and supplies, utilities, and other operational expenses for the operation of the mobile dental equipment.
3. Ensure the rational use of the mobile dental clinic within the Province to maximize its benefit to the residents needing dental service.
4. Ensure the proper maintenance, out of its own resources, of the aforesaid mobile dental clinic, including the equipment;

5. Designate the provincial health officer as the focal person who will be coordinating with the DOH regional office for purposes of program monitoring and evaluation.

The Donor reserves the right to revoke this Deed of Donation in case any of the aforesaid conditions are not faithfully complied with by the Donee. In case this Deed of Donation is revoked, the Donee shall surrender the mobile dental clinic, including all its accessories and the equipment, to the Donor within fifteen (15) days from receipt of the Notice of Revocation. Ownership of the said mobile dental equipment shall then vest to the Donor effective upon receipt by the Donee of the Notice of Revocation. And the donee shall have seven (7) days from receipt of the Notice of Revocation to transfer the possession of the mobile dental clinic, including all its accessories and the equipment, to the Donor.

IN WITNESS WHEREOF, the Parties here under set their hand on the date and place above mentioned.

**ACCEPTED**

**DONOR:**

**DONEE:**

**DEPARTMENT OF HEALTH**

**PROVINCIAL GOVERNMENT OF**

By:

By:

**JANETTE LORETO-GARIN, MD, MBA-H**  
Secretary

\_\_\_\_\_  
Governor

**WITNESSES:**

\_\_\_\_\_  
Regional Director, DOH-RO

\_\_\_\_\_  
Provincial Health Officer, Province of

*RESOLVED FURTHER, to send a copy of this resolution to the Honorable Governor, Provincial Health Office, Department of Health, and all other offices concerned for their information.*

*APPROVED. January 06, 2016.*


*I hereby certify that the foregoing is a true and accurate copy of the resolution which was duly adopted by the Sangguniang Panlalawigan of the Province of Guimaras during its regular session held on January 06, 2016.*

  
**LORENA MINIERVA-ITUCAS**  
Secretary to the Sangguniang Panlalawigan

Attested:

  
**ATTY. VICENTE B. DE ASIS**  
Vice Governor/Presiding Officer

Approved:

  
**SAMUEL T. GUMARIN, MD, MPH**  
Governor

JAN 12 2016