



SUPPLY AND DELIVERY OF MEDICAL AND DENTAL SUPPLIES FOR THE UNIVERSITY CLINIC AT MINSU CALAPAN

CITY CAMPUS

Name of Project

**BAC Resolution Recommending Approval
Resolution No. 34, s. 2024**

WHEREAS, the Mindoro State University (MinSU), through the Bids and Awards Committee (BAC) has advertised in the PhilGEPS and MinSU Website the Request for Quotation (RFQ) for the project **“Supply and Delivery of Medical and Dental Supplies for the University Clinic at MinSU Calapan City Campus”** with an Approved Budget for the Contract (ABC) amounting to **Two Hundred Thousand Pesos (Php200,000.00)**;

WHEREAS, in response to the said advertisement, four (4) suppliers were found in the document request list however, only one (1) supplier in the name of **CPA PHARMACY** submitted price quotation before the deadline;

WHEREAS, the detailed evaluation of price quotation resulted in the following:

Approved Budget for the Contract (ABC)	Name of Bidder	Price Quotation
Php200,000.00	CPA Pharmacy	Php147,447.50

WHEREAS, the BAC examined and verified the price quotations submitted by the abovementioned suppliers and were found to be complying and responsive; thus, the project be awarded to the supplier in the name of **CPA PHARMACY** with Single Calculated Responsive Bid (SCRB);

NOW, THEREFORE, the Bids and Awards Committee (BAC) **HEREBY RESOLVED AS IT IS HEREBY RESOLVED**, recommended to the Head of Procuring Entity the approval of this resolution for the abovementioned procurement the awarding of contract for the **“Supply and Delivery of Medical and Dental Supplies for the University Clinic at MinSU Calapan City Campus”** to **CPA Pharmacy** amounting to **One Hundred Forty-seven Thousand Four Hundred Forty-seven Pesos and 50/100 (Php147,447.50)** with official address at Poblacion I, Victoria, Oriental Mindoro as the supplier/bidder with Single Calculated Responsive Bid (SCRB);

RESOLVED, at MinSU Main Campus, Alcate, Victoria, Oriental Mindoro, this 26th day of March, 2024.

ANSELMO R. ULEP, JR.
BAC Vice-Chairperson

NEMESIO H. DAVALLOS, Ph.D.
BAC Chairperson

ELVI C. ESCAREZ, Ph.D.
BAC Member

CIEDELLE P. SALAZAR Ph.D
BAC Member

MELGAR G. FADRIQUEJAN
BAC Member

Approved/Disapproved

CHRISTIAN ANTHONY C. AGUTAYA Ph.D.

OIC, Office of the University President

Date: _____



PhilGEPS

Philippine Government Electronic Procurement System

Central Portal for
Philippine Government
Procurement Opportunities

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Bid Notice Abstract

Request for Quotation (RFQ)

Reference Number 10678526

Procuring Entity MINDORO STATE UNIVERSITY

Title Supply and Delivery of Medical and Dental Supplies for the University Clinic at MinSU Calapan City Campus

Area of Delivery Oriental Mindoro

Solicitation Number:	RFQ 2024-52	Status	Closed
Trade Agreement:	Implementing Rules and Regulations	Associated Components	1
Procurement Mode:	Negotiated Procurement - Small Value Procurement (Sec. 53.9)	Bid Supplements	0
Classification:	Goods	Document Request List	4
Category:	Medical Supplies and Laboratory Instrument	Date Published	21/03/2024
Approved Budget for the Contract:	PHP 200,000.00	Last Updated / Time	21/03/2024 00:00 AM
Delivery Period:	30 Day/s	Closing Date / Time	25/03/2024 01:00 AM
Client Agency:			
Contact Person:	JOHN EDGAR SUALOG ANTHONY HEAD SECRETARIAT Alcate Victoria Oriental Mindoro Philippines 5205 63-43-2862368 minsu.bacoffice@gmail.com		

Description

Please quote your lowest price on the items / listed below, subject to the General Condition on the last page, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than _____ in the address stated in the last page.

NEMESIO H. DAVALOS, Ph.D.
BAC Chairperson

Note: 1. All entries must be typewritten.

2. Delivery Period within _____ calendar days.

3. Warranty shall be for a period of six (6) months for supplies and materials, one (1) year for Equipment, from date of acceptance by the procuring entity.

4. Price validity shall be a period of 30 calendar days.

5. G-EPs Registration Certificate shall be attached upon submission of the Quotation.

6. Bidders shall submit Original Brochures showing certification of the product being offered (optional).

7. Mode of delivery: [] Pick-up (Schedule) [] Door to Door Delivery

Item

No. Unit ITEM AND DESCRIPTION QTY. UNIT

PRICE TOTAL AMOUNT

1 sachets Acetylcysteine Sachet 300

2 tablets Aluminum Hydroxide + Magnesium Hydroxide 400

3 tablets Amlodipine 5mg 400

4 tablets Amoxicillin 500mg 1000

5 ampules Ant-tetanus serum 1500IU 30

6 tablets Ascorbic Acid 500mg 2000

7 tablets Azithromycin oral 240

8 tablets Betahistine 24mg 200	
9 tablets Butamirate 50mg 400	
10 sachets Calamine 3.5 grams topical ointment 120	
11 tablets Cefalexin 500mg 1001	
12 tablets Cetirizine 10mg 500	
13 tablets Clindamycin 300mg 400	
14 tablets Ciproflaxin 500mg 400	
15 tablets Cinnarizine 25mg 199	
16 tubes Clobetasol 15g 4	
17 tablets Cloxacillin 500mg 1000	
18 tablets Co-Amoxiclav 500mg 400	
19 bottles Cromatin 10% 60ml 4	
20 tablets Domperidone 200	
21 tablets Hyoscine 10mg 600	
22 tablets Lagundi 600mg 200	
23 ampules	
Lidocaine hydrochloride + epinepherine	
bitartrate 100	
24 tablets Loratadine 10mg 400	
25 capsule Loperamide 2mg 600	
26 tablets Mefenamic Acid 500mg 2500	
27 tablets Multivitamins 3000	
28 tubes Mupirocin 15 20	
MSU-BAC-FR-05.01	
29 tablets Omeprazole 20mg 100	
30 tablets Paracetamol 500mg 9000	
31 tablets Blumea Balsamifera 500mg 400	
32 tubes Silver Sulfadiazine 4	
33 ampules Tetanus Toxoid 30	
34 tablets Tranexamic Acid 500mg 200	
35 tablets Vitamin B1 B6 B12 1123	
XX	

Created by Annabelle Quinto Madrigal

Date Created 19/03/2024

The PhilGEPS team is not responsible for any typographical errors or misinformation presented in the system. PhilGEPS only displays information provided for by its clients, and any queries regarding the postings should be directed to the contact person/s of the concerned party.

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REQUEST FOR QUOTATION

Supply and Delivery of Medical and Dental Supplies for the University Clinic at MinSU Calapan City Campus

PR No.: 2024-041

RFQ No. 2024-52

ABC Amount: Php200,000.00

Company Name : CPA PHARMACY

Address : Poblacion 1, Victoria, Oriental Mindoro

Please quote your lowest price on the items / listed below, subject to the General Condition on the last page, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than _____ in the address stated in the last page.

NEMESIO H. DAVAROS, Ph.D.

BAC Chairperson

Note:

1. All entries must be typewritten.
2. Delivery Period within 15 calendar days.
3. Warranty shall be for a period of six (6) months for supplies and materials, one (1) year for Equipment, from date of acceptance by the procuring entity.
4. Price validity shall be a period of 30 calendar days.
5. G-EPs Registration Certificate shall be attached upon submission of the Quotation.
6. Bidders shall submit Original Brochures showing certification of the product being offered (optional).
7. Mode of delivery: [] Pick-up (Schedule) [X] Door to Door Delivery

Item No.	Unit	ITEM AND DESCRIPTION	QTY.	UNIT PRICE	TOTAL AMOUNT
1	sachets	Acetylcysteine Sachet	300	25.00	7,500.00
2	tablets	Aluminum Hydroxide + Magnesium Hydroxide	400	11.00	4,400.00
3	tablets	Amlodipine 5mg	400	2.00	800.00
4	tablets	Amoxicillin 500mg	1000	3.00	3,000.00
5	ampules	Ant-tetanus serum 1500IU	30	230.00	6,900.00
6	tablets	Ascorbic Acid 500mg	2000	2.00	4,000.00
7	tablets	Azithromycin oral	240	29.00	6,960.00
8	tablets	Betahistine 24mg	200	25.00	5,000.00
9	tablets	Butamirate 50mg	400	11.00	4,400.00
10	sachets	Calamine 3.5 grams topical ointment	120	50.00	6,000.00
11	tablets	Cefalexin 500mg	1001	5.00	5,005.00
12	tablets	Cetirizine 10mg	500	1.50	750.00
13	tablets	Clindamycin 300mg	400	7.00	2,800.00
14	tablets	Ciproflaxin 500mg	400	5.00	2,000.00
15	tablets	Cinnarizine 25mg	199	2.00	398.00
16	tubes	Clobetasol 15g	4	150.00	600.00
17	tablets	Cloxacilin 500mg	1000	5.50	5,500.00
18	tablets	Co-Amoxiclav 500mg	400	22.00	8,800.00
19	bottles	Cromatin 10% 60ml	4	450.00	1,800.00
20	tablets	Domperidone	200	6.50	1,300.00
21	tablets	Hyoscine 10mg	600	6.00	3,600.00
22	tablets	Lagundi 600mg	200	6.50	1,300.00
23	ampules	Lidocaine hydrochloride + epinephrine bitartrate	100	60.00	6,000.00
24	tablets	Loratadine 10mg	400	7.00	2,800.00
25	capsule	Loperamide 2mg	600	2.00	1,200.00
26	tablets	Mefenamic Acid 500mg	2500	3.50	8,750.00
27	tablets	Multivitamins	3000	2.50	7,500.00
28	tubes	Mupirocin 15	20	800.00	16,000.00



BAGONG PILIPINAS

After having carefully read and accepted your General Condition, I / We quote you on the item at prices noted above

A.D. M.

129-326-144-000000

09176562195

March 24, 2024

Date _____

- Calapan City Campus, Masipit, Calapan City



Mindoro State University
Victoria, Oriental Mindoro 5205 Philippines

Email: universitypresident@minsu.edu.ph
Website: www.minsu.edu.ph
Mobile: +63 977 846 72 28



4. All transactions are subject to withholding of credible Government Taxes per revenue regulation(s) of the Bureau of Internal Revenue
Liquidation Damages

A penalty of one-tenth of one percent (0.001) of the total value of the undelivered goods/services/equipment shall be charged as liquidated damages for every day of delay of the delivery of the purchased goods/services/equipment.

Warranty

Supplier warrants that all goods/services/equipment to be provided are of acceptable industry standard.

Payment

Payment shall be made only upon a certification by the Head of the Procuring Entity to the effect that the GOODS have been rendered or delivered in accordance with the terms of this Contract and have been duly inspected and accepted.

MSU-BAC-FR-05.01

•Main Campus, Alcate, Victoria •Bongabong Campus, Labasan, Bongabong •Calapan City Campus, Masipit, Calapan City

Republic of the Philippines
Department of Budget and Management
PROCUREMENT SERVICE

CERTIFICATE OF PHILGEPS REGISTRATION
(Platinum Membership)

THIS IS TO CERTIFY THAT

CPA PHARMACY

POBLACION 1,
Victoria, Oriental Mindoro, Region IV-B, Philippines

is registered in the *Philippine Government Electronic Procurement System (PhilGEPS)* on 27-Jan-2005 pursuant to Section 8.5.2 of the Revised Implementing Rules and Regulations of Republic Act No. 9184, otherwise known as the Government Procurement Reform Act.

This further certifies that **CPA PHARMACY** has submitted the required eligibility documents in the PhilGEPS Supplier Registry as listed in Annex A, which document is attached hereto and made an integral part hereof.

For the purpose of updating this Certificate, all Class "A" eligibility documents covered by Section 8.5.2 of the Revised Implementing Rules and Regulations of Republic Act No. 9184 supporting the veracity, authenticity and validity of this Certificate shall remain current and updated. The failure by the prospective Bidder to update this Certificate with the current and updated Class "A" eligibility documents shall result in the automatic suspension of its validity until such time that all of the expired Class "A" eligibility documents has been updated.

By submitting this Certificate, the Bidder certifies:

1. the authenticity, genuineness, validity, and completeness of the copy of the original eligibility documents submitted;
2. the veracity of the statements and information contained therein;
3. that the Certificate is not a guaranty that the named registrant will be declared eligible without first being determined to be such for that particular bidding, nor is it an evidence that the Bidder has passed the post-qualification stage; and
4. that any finding of concealment, falsification, or misrepresentation of any of the eligibility documents submitted, or the contents thereof shall be a ground for disqualification from further participation in the bidding process, without prejudice to the imposition of appropriate administrative, civil and criminal penalty in accordance with the laws.

This Certificate is valid until 01-Jun-2024

Issued this 27th day of May 2023.
This is a system generated certificate. No signature is required.



REMINDERS ¹

- *The PhilGEPS office shall not determine the eligibility of merchants. The PhilGEPS office's evaluation of the eligibility requirements shall be for the sole purpose of determining the approval or disapproval of the merchant's application for registration.*
- *A merchant's registration and membership in the GOP-OMR is neither contract-specific nor understood to be tantamount to a finding of eligibility. Neither shall the merchant's successful registration in the GOP-OMR be relied upon to claim eligibility for the purpose of participation in any public bidding.*
- *The determination of the eligibility of merchants, whether registered with the GOP-OMR or not, shall remain with the Bids and Awards Committee (BAC). The BAC's determination of validity of the eligibility requirements shall be conclusive to enable the merchant to participate in the public bidding process.*

Certificate Reference No: 20050162431889333377

List of Eligibility Documents

of
CPA PHARMACY
 POBLACION 1,
 Victoria , Oriental Mindoro , Region IV-B , Philippines

DTI Certificate	DTI Certificate Number : 2209456 Issued By / Signatory : RAMON M. LOPEZ Registration Date : 01-Oct-2020 Expiration Date : 01-Oct-2025
Mayors Permit	Expiration Date : 31-Dec-2023 Permit Number : 888 0047 Place of Issue : VICTORIA ORIENTAL MINDORO Issued By / Signatory : JOSELITO C. MALABANAN Issuance Date : 05-Jan-2023
Tax Clearance	Expiration Date : 22-Feb-2024 TCC Number : RR9A-063-02-22-0347-2023-E Issued By / Signatory : LEVINE F. ILAGAN Issuance date : 22-Feb-2023
Audited Financial Statement	Date of Filing : 17-Apr-2023 Current Asset : 3,156,150.00 Total Asset : 3,659,203.00 Current Liabilities : 322,274.39 Total Liabilities : 322,274.39 Name of Auditor : FLOR S. MARASIGAN BIR RDO Code : 063
PCAB License	Expiration Date : - Issued By / Signatory : Issuance Date : - License Number : License First Issue Date : - Principal Classification : Category :



Republic of the Philippines
Province of Oriental Mindoro
MUNICIPALITY OF VICTORIA

HOW ALL MEN BY THIS PRESENT

Pursuant to the provision of Tax Ordinance Number 06-2016, otherwise known as the revised Revenue Code of Victoria, Oriental Mindoro, after the taxes and Charges, etc., and compliance with the existing requirements permit is hereby granted to herein taxpayer.

Mayor's Permit of Business

Status: Renew	Permit Number: 888-0345	Date of Issuance: 10 Jan 2024 A	Date of Expiration: December 31, 2024
O.R. Number: 3716368	O.R. Date: 1/10/2024	Amount Paid: 30,967.65	Capital Gross Sales: 4,339,606.98

Taxpayer's Name: **MATANGUIHAN, YOLANDA**

Business Name: **CPA PHARMACY**

Nature of Business: **Drugstore, Medical and Dental Supplies and Equipment (Wholesaler/Retailer)
Office Equipment, Machinery and Electronic Equipment**

Address: **OLD MARKET, Victoria, Oriental Mindoro**

PERMIT SHALL BE SUBJECT TO IMMEDIATE CANCELLATION IF THERE IS FAILURE ON PART OF THE GRANTEE TO CONTINUOUSLY COMPLY WITH THE PROVISION OF THE BUILDING CODE OF THE PHILIPPINES AND OTHER PERTINENT LAWS AND REGULATION RELATIVE TO ISSUANCE OF PERMIT AND LICENSE

Approved by

JOSELITO C. MALABANAN
Municipal Mayor

This Franchise Permit and Official Receipt shall be displayed or posted for public view in a conspicuous place within the place of business of undertaker.

Republic of the Philippines)
Province of Or. Mindoro) SS
Municipality of Victoria)

Omnibus Sworn Statement

AFFIDAVIT

I, YOLANDA D. MATANGUIHAN, of legal age, married, Filipino, and residing at Poblacion 1, Victoria, Oriental Mindoro, after having been duly sworn in accordance with law, do hereby depose and state that:

1. I am the sole proprietor of CPA PHARMACY with office address at Poblacion 1, Victoria, Oriental Mindoro;
2. As the owner and sole proprietor of CPA PHARMACY, I have full power and authority to do, execute and perform any and all acts necessary to represent it in the bidding for Supply and Delivery of Medical and Dental Supplies for the University Clinic at MinSU Calapan City Campus;
3. CPA PHARMACY is not "blacklisted" or barred from bidding by the Government of the Philippines or any of its agencies, offices, corporations, or Local Government Units, foreign government/foreign or international financing institution whose blacklisting rules have been recognized by the Government Procurement Policy Board;
4. Each of the documents submitted in satisfaction of the bidding requirements is an authentic copy of the original, complete, and all statements and information provided therein are true and correct;
5. CPA PHARMACY is authorizing the Head of the Procuring Entity or its duly authorized representative to verify all the documents submitted;
6. I am not related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;
7. CPA PHARMACY complies with existing labor laws and standards; and
8. CPA PHARMACY is aware of and has undertaken the following responsibilities as a Bidder:
 - a. Carefully examine all of the Bidding Documents;
 - b. Acknowledge all conditions, local or otherwise, affecting the implementation of the Contract;
 - c. Made an estimate of the facilities available and needed for the contract to be bid, and
 - d. Inquire or secure Supplemental/Bid Bulletin(s) issued for the Supply and Delivery of Medical and Dental Supplies for the University Clinic at MinSu Calapan City Campus.
9. CPA PHARMACY did not give or pay directly or indirectly, any commission, amount, fee, or any form of consideration, pecuniary or otherwise, to any person or official, personnel or representative of the government in relation to any procurement project or activity.
10. In case advance payment was made or given, failure to perform or deliver any of the obligations and undertakings in the contract shall be sufficient grounds to constitute criminal liability for Swindling (Estafa) or the commission of fraud with the unfaithfulness or abuse of confidence through misappropriating or converting any payment received by a person or entity under an obligation involving the duty to deliver certain goods or services, to the prejudice of the public and the government of the Philippines pursuant to Article 315 of Act No. 3815 s. 1930, as amended, or the Revised Penal Code.

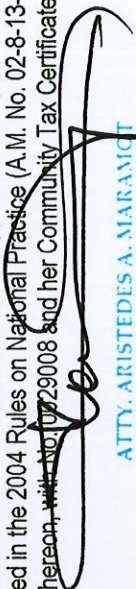
IN WITNESS WHEREOF, I have hereunto set my hand this 22nd day of March 2024, at Victoria Oriental Mindoro, Philippines.


YOLANDA D. MATANGUIHAN
Affiant

ACKNOWLEDGEMENT

SUBSCRIBE AND SWORN to before me this 22nd day of March, 2024 at Victoria, Oriental Mindoro, Philippines. Affiant personally known to me and was identified by me through competent evidence of identity as defined in the 2004 Rules on National Practice (A.M. No. 02-8-13-SC). Affiant exhibited to me her PRC ID, with her photograph and signature appearing thereon, with ID No. 15667745 issued on January 10, 2024 at Victoria, Oriental Mindoro, Philippines.

Witness my hand and seal this 22nd day of March, 2024.


ATTY. ARISTEDES A. MARAÑON
Notary Public

Until Dec. 31, 2024 NP-22-234

PTR No. 3565882

Victoria Or. Mindoro /01-02-2024

Roll No. 41130 /April 15, 1996

IBP No. 415498 /01-16-2024/Or. Mindoro

MCLE Compliance No. VII -0013433

Valid until 04-14-2025

Doc. No. 287
Page No. 27
Book No. 241
2024

BIR FORM

2303

REVISED: APRIL 2019

REPUBLIKA NG PILIPINAS
KAGAWARAN NG PANANALAPI
KAWANIHAN NG RENTAS INTERNAS
REVENUE REGION NO. 09A - CABAMIRO (CAVITE-BATANGAS-MINDORO-ROMBLON)
REVENUE DISTRICT OFFICE NO. 063 - CALAPAN, ORIENTAL MINDORO

OCN: 063RC20220000002713

Date OCN Generated: July 18, 2022

UPDATED ON JUL 18 2022**CERTIFICATE OF REGISTRATION**

TIN & BRANCH CODE 129-326-144-00000	NAME OF TAXPAYER MATANGUIHAN, YOLANDA DIMAANO		TIN ISSUANCE DATE October 1, 2007
REGISTERING OFFICE	☒ Head Office	☐ Branch	
REGISTERED ADDRESS POBLACION I 5205 VICTORIA ORIENTAL MINDORO PHILIPPINES			

TAX TYPES	FORM TYPES	FILING START DATE	FILING FREQUENCY	FILING DUE DATE
WITHHOLDING TAX - COMPENSATION	1604C	January 1, 2023	ANNUALLY	On or before January 31 of the year following the calendar year in which the compensation payment and other income payments were paid or accrued.
VALUE ADDED TAX	2550M	May 12, 2011	MONTHLY	Not later than the 20th day following the close of the month.
VALUE ADDED TAX	2550Q	May 12, 2011	QUARTERLY	Not later than the 25th day following the close of each taxable quarter.
REGISTRATION FEE	0605	October 1, 2007	ANNUALLY	On or before the last day of January.
INDIVIDUAL INCOME TAX	1701	September 16, 2003	ANNUALLY	On or before April 15 of each year covering income for the preceding taxable year.
INDIVIDUAL INCOME TAX	1701Q	July 31, 2007	QUARTERLY	1st Quarter-on or before MAY 15 2nd Quarter-on or before AUGUST 15 3rd Quarter-on or before November 15
WITHHOLDING TAX - EXPANDED/OTHERS	0619E	July 18, 2022	MONTHLY	On or before the 10th day of the month following the month in which withholding was made.
WITHHOLDING TAX - EXPANDED/OTHERS	1601EQ	July 18, 2022	QUARTERLY	Not later than the last day of the month following the close of the quarter during which withholding was made.
WITHHOLDING TAX - EXPANDED/OTHERS	1604E	January 1, 2023	ANNUALLY	On or before March 1 of the year following the calendar year in which the income payments subject to expanded withholding taxes or exempt from withholding tax were paid or accrued.
WITHHOLDING TAX - COMPENSATION	1601C	March 16, 2022	MONTHLY	On or before the 10th day of the month following the month when the withholding was made except for taxes withheld for December which shall be filed and paid/remitted on or before



REPUBLIKA NG PILIPINAS
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REGISTERING OFFICE	x Head Office	Branch
REGISTERED ADDRESS POBLACION I 5205 VICTORIA ORIENTAL MINDORO PHILIPPINES		

TAXPAYER TYPE/S	SINGLE PROPRIETORSHIP ONLY (RESIDENT CITIZEN)		January 15 of the succeeding year.
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BUSINESS INFORMATION DETAILS

TRADE NAME 1 (PSIC)	CPA PHARMACY	CATEGORY	REGISTRATION DATE
Line of Business	46594-WHOLESALE OF PROFESSIONAL AND SCIENTIFIC AND MEASURING AND CONTROLLING EQUIPMENT WHOLESALE OF PROFESSIONAL AND SCIENTIFIC AND MEASURING AND CONTROLLING EQUIPMENT	Secondary	
(PSIC)	47722-RETAIL SALE OF MEDICAL, SURGICAL AND ORTHOPEDIC GOODS/INSTRUMENTS AND DENTAL SUPPLIES	Primary	
Line of Business	RETAIL SALE OF MEDICAL, SURGICAL AND ORTHOPEDIC GOODS/INSTRUMENTS AND DENTAL SUPPLIES	Secondary	
(PSIC)	47720-RETAIL SALE OF PHARMACEUTICAL AND MEDICAL GOODS, COSMETIC AND TOILET ARTICLES IN SPECIALIZED STORES	Secondary	
Line of Business	RETAIL SALE OF OTHER GOODS IN SPECIALIZED STORES	Secondary	
(PSIC)	46429-WHOLESALE OF MISCELLANEOUS CONSUMER GOODS, N.E.C.	Secondary	
Line of Business	WHOLESALE OF HOUSEHOLD GOODS	Secondary	
(PSIC)	47739-OTHER RETAIL SALE OF NEW GOODS IN SPECIALIZED STORES, N.E.C.	Secondary	
Line of Business	RETAIL SALE OF OTHER GOODS IN SPECIALIZED STORES	Secondary	

REMINDERS:

1. An annual registration fee shall be paid upon registration and every year thereafter on or before the last day of January, using BIR Form No. 0605.
2. Filing of required tax return/s to conform with the above tax types, whether with or without business

BIR FORM

2303

REVISED: APRIL 2019



REPUBLIKA NG PILIPINAS
KAGAWARAN NG PANANALAPI
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REGISTERING OFFICE	x Head Office	Branch
REGISTERED ADDRESS POBLACION I 5205 VICTORIA ORIENTAL MINDORO PHILIPPINES		

operation, to avoid penalties.

- For new business registrants, application for registration of manual Books of Accounts (B/As) shall be before the deadline for filing of the initial quarterly income tax return or annual income tax return whichever comes earlier, from the date of registration. Registration of new set of manual B/As shall be before its use.
- Immediately inform the district office in case of transfer/cessation of business and other changes in registration information by filing BIR Form No. 1905.
- For Self-Employed Individuals (SEI) whose gross sales and/or receipts and other non-operating income does not exceed P3,000,000 and who opted to avail of the 8% Income tax rate, the tax type Percentage Tax (PT) shall not be reflected in the Certificate of Registration (COR). However, at the start of each taxable year, such SEI shall be automatically subjected to graduated income tax rates and required to file quarterly percentage tax return (BIR Form No. 2551Q) and option to replace the COR to reflect "PT", unless qualified and opted to avail of the 8% Income tax rate annually.



06339778

MERIAN Z. ROMERO
CHIEF, CLIENT SUPPORT SECTION

EMELITA R. ABO

REVENUE DISTRICT OFFICER
(Signature over Printed Name)

I hereby certify that the above named person is registered as indicated above, under the provision of the National Internal Revenue Code, as amended.

THIS CERTIFICATE MUST BE EXHIBITED CONSPICUOUSLY IN THE PLACE OF BUSINESS.



Bureau of Internal Revenue
Republic of the Philippines



REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF FINANCE
BUREAU OF INTERNAL REVENUE

FILING REFERENCE NO.

TIN	: 129-326-144-000
Name	: MATANGUIHAN YOLANDA DIMAANO
RDO	: 063
Form Type	: 1701Q
Reference No.	: 422300056177270
Amount Payable (Over Remittance)	: 3,696.80
Accounting Type	: C - Calendar
For Tax Period	: 09/30/2023
Date Filed	: 10/19/2023
Tax Type	: IT



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Reference No: 422300056177270
Date Filed: October 19 2023 02:25 PM
Batch Number: 0



For BIR Use Only BCS/Item

1701Q 01/18ENCSP1



Republika ng Pilipinas
Kagawaran ng Pananalapi
Kawanihan ng Rentas
Internas

Quarterly Income Tax Return

For Individuals, Estates and Trusts
Enter all required information in CAPITAL LETTERS using BLACK Ink. Mark applicable boxes with an "X". Two copies MUST be filed with the BIR and one held by the Tax Filer.

BIR Form No.
1701Q
January 2018 (ENCSP)
Page 1

1 For the Year (YYYY) 2023	2 Quarter	3 Amended Return?	4 Number of Sheet/s Attached 0
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Part I – Background Information on Taxpayer/Filer

5 Taxpayer Identification Number (TIN)	129	-	326	-	144	-	000	6 RDO Code	063
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7 Taxpayer/Filer Type	
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8 Alphanumeric Tax Code (ATC)	
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9 Taxpayer/Filer's Name (Last Name, First Name, Middle Name for Individual) / ESTATE of (First Name, Middle Name, Last Name) / TRUST FAO: (First Name, Middle Name, Last Name)	MATANGUIHAN, YOLANDA DIMAANO
--	------------------------------

10 Registered Address (Indicate complete registered address. If branch, indicate the branch address. If the registered address is different from the current address, go to the RDO to update registered address by using BIR Form 1905)	
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PUBLIC MARKET OR. MINDORO	10A ZIP Code	5205
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11 Date of Birth (MM/DD/YYYY)	12 Email Address
09/15/1963	ydmatanguihan_cpa@yahoo.com

13 Citizenship	14 Foreign Tax Number (if applicable)	15 Claiming Foreign Tax Credits?
FILIPINO		

16 Tax Rate* (choose one, for income from business/ profession)	16A Method of Deduction

Part II – Background Information on Spouse (if applicable)

17 Spouse's TIN	129	-	326	-	144	-	000	18 RDO Code	
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19 Filer's Spouse Type	
------------------------	--

20 ATC	
--------	--

21 Spouse's Name (Last Name, First Name, Middle Name)	
---	--

22 Citizenship	23 Foreign Tax Number, if applicable	24 Claiming Foreign Tax Credits?

25 Tax Rate* (choose one,	
------------------------------	--

for income
from business/
profession)

25A Method of Deduction

Part III – Total Tax Payable (DO NOT enter Centavos: 49 Centavos or Less drop down; 50 or more round up)

Particulars	A) Taxpayer/Filer	B) Spouse
26 Tax Due (From Part V, Schedule I-Item 46 OR Schedule II-Item 54)	42,255	0
27 Less: Tax Credits/Payments (From Part V, Schedule III-Item 62)	38,558	0
28 Tax Payable/(Overpayment) (Item 26 Less Item 27) (From Part V, Item 63)	3,697	0
29 Add: Total Penalties (From Part V, Schedule IV-Item 67)	0	0
30 Total Amount Payable/(Overpayment) Sum of Items 28 and 29 (From Part V, Item 68)	3,697	0
31 Aggregate Amount Payable/(Overpayment) (Sum of Item 30A and 30B)		3,697

I declare under the penalties of perjury, that this annual return has been made in good faith, verified by me, and to the best of my knowledge and belief, is true and correct, pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under authority thereof. (If Authorized Representative, attach authorization letter and indicate TIN.)

Signature over Printed Name of Taxpayer/Authorized Representative/Tax Agent
(Indicate Title/Designation and TIN)

Part IV – Details of Payment

Particulars	Drawee Bank/Agency	Number	Date (MM/DD/YYYY)	Amount
32 Cash/Bank Debit Memo				
33 Check				
34 Tax Debit Memo				
35 Others (specify below)				

Machine Validation/Revenue Official Receipt Details (if not filed with an Authorized Agent Bank)

Stamp of receiving Office/AAB and Date of Receipt
(RO's Signature/Bank Teller's Initial)

Attachments

Add Attachment



BIR Form No.

1701QJanuary 2018 (ENCS)
Page 2**Quarterly Income Tax Return**
For Individuals, Estates and TrustsGuidelines and Instructions | Help
Reference No: 422300056177270
Date Filed: October 19 2023 02:25 PM
Batch Number: 0

1701Q 01/18ENCS P2

TIN		Taxpayer/Filer's Last Name	
129	- 326	- 144	- 000
PART V – COMPUTATION OF TAX DUE (DO NOT enter Centavos: 49 Centavos or Less drop down: 50 or more round up)			
Declaration this Quarter		A) Taxpayer/Filer	B) Spouse
If graduated rate, fill in items 36 to 46; if 8%, fill in items 47 to 54			
Schedule I – For Graduated IT Rate			
36	Sales/Revenues/Receipts/Fees (net of sales returns, allowances and discounts)	244,650	0
37	Less: Cost of Sales/Services (applicable only if availing Itemized Deductions)	185,491	0
38	Gross Income/(Loss) from Operation (Item 36 Less Item 37)	59,159	0
Less: Allowable Deductions			
39	Total Allowable Itemized Deductions	27,695	0
OR			
40	Optional Standard Deduction (OSD) (40% of Item 36)	0	0
41	Net Income/(Loss) This Quarter (If Itemized: Item 38 Less Item 39; If OSD: Item 38 Less Item 40)	31,464	0
Add: 42 Taxable Income/(Loss) Previous Quarter/s		467,310	0
43 Non-Operating Income (specify)		0	0
44 Amount Received/Shared in Income by a Partner from General Professional Partnership (GPP)			
45 Total Taxable Income/(Loss) To Date (Sum of Items 41 to 44)		498,774	0
46 TAX DUE (Item 45 × Applicable Tax Rate based on Tax Table below) (To Part III, Item 26)		42,255	0
Schedule II – For 8% IT Rate			
47 Sales/Revenues/Receipts/Fees (net of sales returns, allowances and discounts)		0	0
48 Add: Non-Operating Income (specify)		0	0
49 Total Income for the quarter (Sum of Items 47 and 48)			
50 Add: Total Taxable Income/(Loss) Previous Quarter (Item 51 of previous quarter)		0	0
51 Cumulative Taxable Income/(Loss) as of This Quarter (Sum of Items 49 and 50)		0	0
52 Less: Allowable reduction from gross sales/receipts and other non-operating income of purely self-employed individuals and/or professionals in the amount of ₱ 250,000		0	0
53 Taxable Income/(Loss) To Date (Item 51 Less Item 52)		0	0
54 TAX DUE (Item 53 × 8% Tax Rate) (To Part III, Item 26)		0	0
Schedule III – Tax Credits/Payments			
55 Prior Year's Excess Credits		0	0
56 Tax Payment/s for the Previous Quarter/s		6,530	0
57 Creditable Tax Withheld for the Previous Quarter/s		29,844	0
58 Creditable Tax Withheld per BIR Form No. 2307 for this Quarter		2,184	0

59 Tax Paid in Return Previously Filed, if this is an Amended Return

60 Foreign Tax Credits, if applicable

61 Other Tax Credits/Payments (specify)

62 Total Tax Credits/Payments (Sum of Items 55 to 61) [\(To Part III, Item 27\)](#)

63 Tax Payable/(Overpayment) (Item 46 or 54, Less Item 62) [\(To Part III, Item 28\)](#)

Schedule IV – Penalties

64 Surcharge

65 Interest

66 Compromise

67 Total Penalties (Sum of Items 64 to 66) [\(To Part III, Item 29\)](#)

68 Total Amount Payable/(Overpayment) (Sum of Items 63 and 67) [\(To Part III, Item 30\)](#)

TABLE 1 – Tax Rates (effective January 1, 2018 to December 31, 2022)

If Taxable Income is:	Tax Due is:
Not over ₱250,000	0%
Over ₱250,000 but not over ₱400,000	20% of the excess over ₱250,000
Over ₱400,000 but not over ₱800,000	₱30,000 + 25% of the excess over ₱400,000
Over ₱800,000 but not over ₱2,000,000	₱130,000 + 30% of the excess over ₱800,000
Over ₱2,000,000 but not over ₱8,000,000	₱490,000 + 32% of the excess over ₱2,000,000
Over ₱8,000,000	₱2,410,000 + 35% of the excess over ₱8,000,000

TABLE 2 – Tax Rates (effective January 1, 2023 and onwards)

If Taxable Income is:	Tax Due is:
Not over ₱250,000	0%
Over ₱250,000 but not over ₱400,000	15% of the excess over ₱250,000
Over ₱400,000 but not over ₱800,000	₱22,500 + 20% of the excess over ₱400,000
Over ₱800,000 but not over ₱2,000,000	₱102,500 + 25% of the excess over ₱800,000
Over ₱2,000,000 but not over ₱8,000,000	₱402,500 + 30% of the excess over ₱2,000,000
Over ₱8,000,000	₱2,202,500 + 35% of the excess over ₱8,000,000

Attachments

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Proceed to Payment

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Bureau of Internal Revenue
Republic of the Philippines



REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF FINANCE
BUREAU OF INTERNAL REVENUE

FILING REFERENCE NO.

TIN	: 129-326-144-000
Name	: MATANGUIHAN YOLANDA DIMAANO
RDO	: 063
Form Type	: 2550Q
Reference No.	: 102400057609832
Amount Payable (Over Remittance)	: -61,900.85
Accounting Type	: C - Calendar
For Tax Period	: 12/31/2023
Quarter	: 4
Date Filed	: 01/18/2024
Tax Type	: VT

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Reference No:102400057609832
Date Filed:January 18, 2024 06:14 PM
Batch Number:2406341465

PSIC: 5138



Republika ng Pilipinas
Kagawaran ng Pananalapi
Kawanihan ng Rentas Internas

Quarterly Value-Added Tax Return

(Cumulative For 3 Months)

Bir Form No.

2550-Q

February 2007 (ENCS)

1	For the Year Ended (MM/YYYY)	2 Quarter	3 Return Period (MM/DD/YYYY)	From To	4 Amended Return?	5 Short Period Return?					
	(December) 2023										
6	TIN	129	326	144	7 RDO Code	000	8 No. of sheets attached	063	9 Line of Business	0	WHOLESALE OF MISCELLANI
10	Taxpayer's Name (For Individual) Last Name, First Name, Middle Name/ (For Non-individual) Registered Name										11 Telephone Number
	MATANGUIHAN, YOLANDA DIMAANO										
12	Registered Address										13 Zip Code
	PUBLIC MARKET OR. MINDORO										5205
14	Are you availing of tax relief under Special Law or International Treaty?										If yes, please specify
PART II											
Computation of Tax											
Sales/Receipts for the Quarter (Exclusive of VAT)										Output Tax Due for the Quarter	
15	Vatable Sales/Receipt - Private (see)	15A				0.00	15B			0.00	
16	Sale to Government	16A				1,825,560.69	16B			219,067.28	
17	Zero Rated Sales/Receipts	17				0.00					
18	Exempt Sales/Receipts	18				0.00					
19	Total Sales/Receipts and Output Tax Due	19A				1,825,560.69	19B			219,067.28	
20	Less: Allowable Input Tax										
20A	Input Tax Carried Over from Previous Period						20A			94,067.38	
20B	Input Tax Deferred on Capital Goods Exceeding P1Million from Previous Quarter						20B			0.00	
20C	Transitional Input Tax						20C			0.00	
20D	Presumptive Input Tax						20D			0.00	
20E	Others						20E			0.00	
20F	Total (Sum of Item 20A, 20B, 20C, 20D & 20E)						20F			94,067.38	
21	Current Transactions										Purchases
21A/B	Purchase of Capital Goods not exceeding P1Million (see)	21A				0.00	21B			0.00	
21C/D	Purchase of Capital Goods exceeding P1Million (see)	21C				0.00	21D			0.00	
21E/F	Domestic Purchases of Goods Other than Capital Goods	21E				751,742.37	21F			90,209.08	
21G/H	Importation of Goods Other than Capital Goods	21G				0.00	21H			0.00	
21I/J	Domestic Purchase of Services	21I				44,190.18	21J			5,302.82	
21K/L	Services Rendered by Non-residents	21K				0.00	21L			0.00	
21M	Purchases Not Qualified for Input Tax	21M				174,625.00					
21N/O	Others	21N					21O				

21P	Total Current Purchases (Sum of Item 21A, 21C, 21E, 21G, 21I, 21K, 21M & 21N)	2,590.39	310.85
22	Total Available Input Tax (Sum of Item 20F, 21B, 21D, 21F, 21H, 21J, 21L & 21O)	973,147.94	
23	Less: Deductions from Input Tax		
23A	Input Tax on Purchases of Capital Goods exceeding P1Million deferred for the succeeding period (see)		189,890.13
23B	Input Tax on Sale to Gov't. closed to expense (see)		0.00
23C	Input Tax allocable to Exempt Sales (see)		0.00
23D	VAT Refund / TCC claimed		0.00
23E	Others		0.00
23F	Total (Sum of Item 23A, 23B, 23C, 23D & 23E)		0.00
24	Total Allowable Input Tax (Item 22 less Item 23F)		189,890.13
25	Net VAT Payable (Item 19B less Item 24)		29,177.15
26	Less: Tax Credits/Payments		
26A	Monthly VAT Payments - previous two months		0.00
26B	Creditable Value-Added Tax Withheld (see Sch. 6)		91,078.00
26C	Advance Payment for Sugar and Flour Industries (see)		0.00
26D	VAT withheld on Sales to Government (see)		0.00
26E	VAT paid in return previously filed, if this is an amended return		0.00
26F	Advance Payments made (please attach proof of payments - BIR Form No. 0605)		0.00
26G	Others		0.00
26H	Total Tax Credits/Payments(Sum of Item 26A, 26B, 26C, 26D, 26E, 26F, & 26G)		91,078.00
27	Tax Still Payable/ (Overpayment) (Item 25 less Item 26H)		-61,900.85
28	Add: Penalties		
28A	Surcharge	0.00	
28B	Interest	0.00	
28C	Compromise	0.00	
29	Total Amount Payable (Overpayment) (Sum of Item 27& 28D)		-61,900.85

Attachments

Attachment Details

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REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF FINANCE
BUREAU OF INTERNAL REVENUE
REVENUE REGION NO. 9A - CaBaMiRo
CITY OF STO. TOMAS, BATANGAS
QF-TCC-01-01-2023.00

Annex "M"

TCBP NO. RR9A-063-02-29-R0407-2024-E

TAX CLEARANCE CERTIFICATE

(Pursuant to Executive Order No. 398)

MATANGUIHAN, YOLANDA

DIMAANO

(CPA PHARMACY)
Name of Taxpayer

POBLACION I, VICTORIA, ORIENTAL MINDORO

Address

129-326-144-00000

Taxpayer Identification Number

This is to certify that the above mentioned taxpayer is eligible for issuance of this Tax Clearance Certificate having satisfied all the criteria set forth by the BIR as of the date of this certification pursuant to Revenue Regulations No. 8-2016, as amended.

Tax liabilities recorded after the aforesaid dates or outside the jurisdiction of this Office are not covered by this tax clearance.

Issued this 29th day of February, 2024.

NOTE: THIS CERTIFICATE SHALL BE VALID AND EFFECTIVE FROM DATE OF ISSUE UNTIL **MARCH 01, 2025** ONLY OR UNTIL REVOKED FOR VIOLATION OF THE CRITERIA SPECIFIED UNDER REVENUE REGULATIONS NO. 8-2016, AS AMENDED AND REVENUE MEMORANDUM ORDER NO. 46-2018, WHICHEVER COMES EARLIER. THIS SHALL NOT BE USED ON SALES/TRANSFER OF REAL PROPERTIES.
CERTIFICATION FEE OF P100 WAS PAID ON FEBRUARY 19, 2024 UNDER EFPS PAYMENT TRANSACTION NO. 249717015.
ANY ERASURE MADE ON THIS TCC SHALL RENDER IT NULL AND VOID.



[Signature]

AMIHAN L. VALDEZ

Asst. Chief, Collection Division

Officer-in-Charge

02/29/2024

DOCUMENTARY STAMP TAX
DATE OF PAYMENT: 02/27/2024
PAYMENT CONFIRMATION:
Ym202402272308405815969662
AMOUNT: P30.00

WARNING: Counterfeiting is punishable by law. For authenticity, please visit BIR website www.bir.gov.ph/index.php/tax-clearance/released-tax-clearance.html. Tax Clearance Certificate [for bidding purposes] not listed/posted herein will be deemed to have originated from an illegal source.

This certifies that

CPA PHARMACY
(NATIONAL)

is a business name registered in this office pursuant to the provisions of Act 3883, as amended by Act 4147 and Republic Act No. 863, and in compliance with the applicable rules and regulations prescribed by the Department of Trade and Industry.

This certificate issued to

YOLANDA DIMAANO MATANGUIHAN

is valid from 01 October 2020 to 01 October 2025 subject to continuing compliance with the above-mentioned laws and all applicable laws of the Philippines, unless voluntarily cancelled

In testimony whereof, I hereby sign this

Certificate of Business Name Registration

and issue the same on 01 October 2020 in the Philippines.


RAMON M. LOPEZ
Secretary

Business Name No. 2209456

This certificate is not a license to engage in any kind of business and valid only at the scope indicated herein.



APZC451711556783



Republic of the Philippines
Department of Health
Food and Drug Administration
Civic Drive, Filinvest Corporate City
Alabang, Muntinlupa City



LICENSE TO OPERATE

as

Drug Distributor-Wholesaler is hereby granted to CPA PHARMACY

Public Market, Poblacion 1, Victoria, Oriental Mindoro, Mimaropa
(Region IV-B), 5205, Victoria, Oriental Mindoro

Owner: **YOLANDA D. MATANGUIHAN**
License Number: **CDRR-RIVB-DW-652922**
Application Type: **Renewal**
Date of Issuance: **08 June 2023**
Validity of License: **31 August 2026**



This LTO shall be renewed within **90 days** before its expiration, upon compliance with relevant laws, rules and regulations and the payment of fees. This LTO may be suspended, cancelled or revoked by this Office for cause if found violating RA 9711 and related issuances.

Furthermore, with this LTO, the FDA allows the establishment to apply for a market authorization [i.e. registration (CPR) or notification] for health products prior to manufacture, importation, sale or offer for sale, distribution, transfer and advertisement as the case may be.

DR. SAMUEL A. ZACATE
Director General

This electronic-LTO (eLTO) is computer generated and does not require signature

APPROVED BUDGET FOR THE CONTRACT (ABC)
Supply and Delivery of Medical and Dental Supplies for the University Clinic at MinSU Calapan City Campus
Masipit, Calapan City, Oriental Mindoro
Project Name and Location

Stations: Mindoro State University

Length:

Contract Duration:

ITEM NO.	DESCRIPTION	QUANTITY	UNIT	CURRENT MARKET PRICE	TOTAL COST	VAT, OTHER TAXES AND/OR DUTIES APPLICABLE	FREIGHT & INSURANCE	OTHER INDIRECT COSTS	OTHER COST FACTORS		TOTAL COST	UNIT COST
									INFLATION, CURRENCY			
									%	VALUE		
									INFLATION, CURRENCY			
									%	VALUE		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
									(5)X(9)	(10%[(5)+(10)]	(11) / (3)	
1	Acetylcysteine Sachet	300	sachets	14.60	4,380.00							
2	Aluminum Hydroxide + Magnesium Hydroxide	400	tablets	8.50	3,400.00							
3	Amlodipine 5mg	400	tablets	4.50	1,800.00							
4	Amoxicillin 500mg	1000	tablets	6.00	6,000.00							
5	Ant-tetanus serum 1500IU	30	ampules	57.00	1,710.00							
6	Ascorbic Acid 500mg	2000	tablets	4.00	8,000.00							
7	Azithromycin oral	240	tablets	79.67	19,120.80							
8	Betahistine 24mg	200	tablets	42.50	8,500.00							
9	Butamirate 50mg	400	tablets	15.50	6,200.00							
10	Calamine 3.5 grams topical ointment	120	sachets	60.00	7,200.00							
11	Cefalexin 500mg	1001	tablets	6.40	6,406.40							
12	Cetirizine 10mg	500	tablets	4.50	2,250.00							
13	Clindamycin 300mg	400	tablets	37.00	14,800.00							
14	Ciproflaxin 500mg	400	tablets	8.00	3,200.00							
15	Cinnarizine 25mg	199	tablets	2.20	437.80							
16	Clobetasol 15g	4	tubes	115.00	460.00							
17	Cloxacillin 500mg	1000	tablets	11.00	11,000.00							
18	Co-Amoxiclav 500mg	400	tablets	19.00	7,600.00							
19	Cromatin 10% 60ml	4	bottles	500.00	2,000.00							
20	Domperidone	200	tablets	15.00	3,000.00							
21	Hyoscine 10mg	600	tablets	6.20	3,720.00							
22	Lagundi 600mg	200	tablets	3.35	670.00							
23	Lidocaine hydrochloride + epinephrine bitartrate	100	ampules	37.00	3,700.00							
24	Loratadine 10mg	400	tablets	9.00	3,600.00							
25	Loperamide 2mg	600	capsule	3.80	2,280.00							
26	Mefenamic Acid 500mg	2500	tablets	4.00	10,000.00							

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Republic of the Philippines
MINDORO STATE UNIVERSITY
Main Campus
Alcate, Victoria, Oriental Mindoro



PURCHASE REQUEST

Fund Cluster: MDS

Office/Section : CLINIC		PR No.: 2024 - 041 Responsibility Center Code :		Date: March 4, 2024	
Stock/ Property No.	Unit	Item Description	Qty	Unit Cost	Total Cost
1	sachets	Acetylcysteine sachet	300	14.60	4,380.00
2	tablets	Aluminum Hydroxide+ Magnesium Hydroxide	400	8.50	3,400.00
3	tablets	Amlodipine 5mg	400	4.50	1,800.00
4	tablets	Amoxicillin 500mg	1000	6.00	6,000.00
5	ampules	Anti-tetanus serum 1500 IU	30	57.00	1,710.00
6	tablets	Ascorbic Acid 500 mg	2000	4.00	8,000.00
7	tablets	Azithromycin oral	240	79.67	19,120.80
8	tablets	Betahistine 24mg	200	42.50	8,500.00
9	tablets	Butamirate 50mg	400	15.50	6,200.00
10	sachets	Calamine 3.5 grams topical ointment	120	60.00	7,200.00
11	tablets	Cefalexin 500mg	1001	6.40	6,406.40
12	tablets	Cetirizine 10mg	500	4.50	2,250.00
13	tablets	Clindamycin 300mg	400	37.00	14,800.00
14	tablets	Ciprofloxacin 500mg	400	8.00	3,200.00
15	tablets	Cinnarizine 25mg	199	2.20	437.80
16	tubes	Clobetasol 15g	4	115.00	460.00
17	tablets	Cloxacillin 500mg	1000	11.00	11,000.00
18	tablets	Co- Amoxiclav 500mg	400	19.00	7,600.00
19	bottles	Cromatin 10% 60 ml	4	500.00	2,000.00
20	tablets	Domperidone	200	15.00	3,000.00
21	tablets	Hyoscine 10mg	600	6.20	3,720.00
22	tablets	Lagundi 600mg	200	3.35	670.00
23	ampules	Lidocaine hydrochloride + epinephrine bitartrate	100	37.00	3,700.00
24	tablets	Loratadine 10mg	400	9.00	3,600.00
25	capsules	Loperamide 2mg	600	3.80	2,280.00
Subtotal 01					131,435.00

Purpose: To procure sufficient number of medical and dental supplies for MCC use. MDS-14-7
101-200-03-246
062030700

Requested by: Signature : Printed Name : Designation : Director for Auxiliary and General Services	Recommending Approval: Signature : Printed Name : Designation : Vice President for Administration and Finance	Certified Allotment Available: Signature : Printed Name : Designation : Budget Officer III	Approved by: Signature : Printed Name : Designation : OIC- University President
---	--	---	--

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ALLOTMENT AVAILABLE
CHARGEABLE AGAINST

MDS
062030700

MACHERMIE R. LANDICHO
Acting Budget Officer
MinSCAT - Calapan

