



**SUPPLY AND DELIVERY OF DRUGS AND MEDICINES FOR THE UNIVERSITY CLINIC AT MinSU**  
**BONGABONG CAMPUS**

Name of Project

**BAC Resolution Recommending Approval**  
**Resolution No. 88, s. 2024**

**WHEREAS**, the Mindoro State University (MinSU), through 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 Drugs and Medicines for the University Clinic at MinSU Bongabong Campus"** with an Approved Budget for the Contract (ABC) in the amount of **Two Hundred Thousand Pesos (Php200,000.00)**;

**WHEREAS**, in response to the said advertisement, one (1) supplier was found in the document request list; and, 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	Php144,185.00

**WHEREAS**, the BAC examined and verified the price quotations submitted by the abovementioned supplier and was 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 members of 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 and awarding of contract for the **"Supply and Delivery of Drugs and Medicines for the University Clinic at MinSU Bongabong Campus"** to **CPA Pharmacy** amounting to **One Hundred Forty-Four Thousand One Hundred Eighty-Five Pesos (Php144,185.00)** 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 3<sup>rd</sup> day of May, 2024.

**ANSELMO R. ULEP, JR.**  
BAC Vice-Chairperson

**NEMESIO H. DAVALOS, Ph.D.**  
BAC Chairperson

**ELVI C. ESCAREZ, Ph.D.**  
BAC Member

**CIEDELLE P. SALAZAR Ph.D.**  
BAC Member

**MELGAR G. FADRIQUELAN**  
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** 10789259  
**Procuring Entity** MINDORO STATE UNIVERSITY  
**Title** Supply and Delivery of Drugs and Medicines for the University Clinic at MinSU Bongabong Campus  
**Area of Delivery** Oriental Mindoro

<b>Solicitation Number:</b>	RFQ No. 2024-83	<b>Status</b>	<b>Closed</b>
<b>Trade Agreement:</b>	Implementing Rules and Regulations	<b>Associated Components</b>	1
<b>Procurement Mode:</b>	Negotiated Procurement - Small Value Procurement (Sec. 53.9)	<b>Bid Supplements</b>	0
<b>Classification:</b>	Goods	<b>Document Request List</b>	1
<b>Category:</b>	Drugs and Medicines	<b>Date Published</b>	25/04/2024
<b>Approved Budget for the Contract:</b>	PHP 200,000.00	<b>Last Updated / Time</b>	25/04/2024 00:00 AM
<b>Delivery Period:</b>	30 Day/s	<b>Closing Date / Time</b>	02/05/2024 17:00 PM
<b>Client Agency:</b>			
<b>Contact Person:</b>	MARK LESTER A MAGPANTAY Head, BAC Secretariat Alcate Victoria Oriental Mindoro Philippines 5205 63-9-154612960 macmagpantay@minsu.edu.ph		

#### 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 tabs Acetylcysteine 600mg 400

2 tabs Aluminum Hydroxide + magnesium Hydroxide 200mg + 100mg 500

3 tabs Amlopedine Besilate 5mg 100

4 tabs Amoxicillin 500mg 1000

5 tabs Ascorbic Acid (Vit. C) 500mg 2000



<b>Created by</b>	Annabelle Quinto Madrigal
<b>Date Created</b>	24/04/2024

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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**Mindoro State University**  
Victoria, Oriental Mindoro 5205 Philippines

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



## REQUEST FOR QUOTATION

Supply and Delivery of Drugs and Medicines for the University Clinic at MinSU Bongabong Campus

PR No.: 2024-050

RFQ No. 2024-83

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. DAVALOS, 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	tabs	Acetylcysteine 600mg	400	32.00	12,800.00
2	tabs	Aluminum Hydroxide + magnesium Hydroxide 200mg + 100mg	500	3.50	1,750.00
3	tabs	Amlopidine Besilate 5mg	100	2.00	200.00
4	tabs	Amoxicillin 500mg	1000	3.50	3,500.00
5	tabs	Ascorbic Acid (Vit. C) 500mg	2000	2.00	4,000.00
6	tabs	Azithromycin 500mg	150	35.00	5,250.00
7	tabs	Azithromycin 500mg	200	25.00	5,000.00
8	tabs	Betahistine 24mg	500	25.00	12,500.00
9	tabs	cefuroxime 500mg	1000	25.00	25,000.00
10	tabs	Co-Amoxiclav 625mg	5	120.00	600.00
11	Bottle	Plain NSS 500ml	5	120.00	600.00
12	Bottle	D5 Water 500ml	200	8.00	1,600.00
13	tabs	Domperidone 10mg	10	250.00	2,500.00
14	tube	Erythromycin 0.5% 5g (eye ointment)	10	40.00	400.00
15	Bottle	Hydrogen Peroxide 3% 120ml	200	7.00	1,400.00
16	tabs	Hyosine -N Butylbromide 10mg	10	200.00	2,000.00
17	Bottle	Hypromellose 0.3% 10ml	500	7.00	3,500.00
18	tablet	Ibuprofen 400mg	3000	6.50	19,500.00
19	tablet	Ilagundi (vitex Negundo L) 600mg	300	1.25	375.00
20	capsule	Loperamide 2mg	500	7.00	3,500.00
21	tablet	Loratadine 10mg	100	5.00	500.00
22	tablet	Losartan potassium 50mg	30	125.00	3,750.00
23	tablet	Mebendazole 500mg chewable	500	3.50	1,750.00
24	tablet	Mefenamic Acid 500mg	3000	2.50	7,500.00
25	capsule	Multivitamins	20	180.00	3,600.00
26	tube	Mupirocin Ointment 2% 5g	200	6.00	1,200.00
27	capsule	Omeprazole 20mg	4000	1.35	5,400.00
28	tab	paracetamol 500mg	10	120.00	1,200.00
28	Bottle	Povidone Iodine Wound Solution 10% 120ml			

MSU-BAC-FR-05.01





Email: [universitypresident@minsu.edu.ph](mailto:universitypresident@minsu.edu.ph)  
Website: [www.minsu.edu.ph](http://www.minsu.edu.ph)  
Mobile: +63 977 846 72 28

[illegible]

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

above  
YOLANDA D. MATANGUIHAN

Supplier's Signature over Printed Name

129-326-144-00000

TIN No. of Establishment

09176562195

Contact Number

April 30, 2024

Date \_\_\_\_\_

MSU-BAC-FR-05.01





#### General Conditions

1. Quotations and other requirements stated below shall be submitted to the Bids and Awards Committee (BAC) Office, Mindoro State University -Main Campus, Alcate, Victoria, Oriental Mindoro, Philippines on the date and time stated in this RFP.
  2. Supplier shall submit the following requirements:
    - a. Duly signed original copy of Request for Quotation (RFQ). Prices shall be quoted in Philippine Pesos.
    - b. PhilGEPS Registration
    - c. Valid Mayor's/Business Permit
    - d. Omnibus Sworn Statement
    - e. BIR Certificate of Registration
    - f. Latest Income/Business Tax Return
    - g. TAX Clearance
    - h. DTI Registration/SEC Certificate
    - i. Original Brochures or certificates of the items offered showing its performance characteristics or specifications, if applicable
- Price validity shall be 30 calendar days from the deadline of submission of quotation.

#### Ocular Inspection

Upon the decision of the End-User and BAC, the supplier and its concerned premises may be subjected to ocular inspection and approval by the End-User and/or TWG Inspections of the BAC prior to the award.

#### Award

The supplier that submitted the lowest calculated responsive quotation, and passed the inspection conducted by the End-User and BAC prior to the event, if any, shall be awarded the contract.

#### Evaluation of Quotations

Quotations shall be compared and evaluated on the basis of the following criteria:

1. Completeness of Submission
2. Compliance with Item & Description Requirements
3. Price

#### Instructions

1. Supplier shall be responsible for the source(s) of its goods/services/equipment, and which shall be in accordance with the schedule and specifications of the RFQ or contract. Failure of the supplier to comply with this provision shall be ground for cancellation of the award or purchase order issued to the supplier.
2. Supplier that accepted an award, purchase order, or contract but failed to deliver the required goods/services/equipment within the time called for in the award, purchase order, or contract shall be disqualified from participating in MinSU or any of MinSU campuses future procurement activities. This is without prejudice to the imposition of other sanctions prescribed under R.A. 9184 and its IRR-A against the supplier.
3. All duties, excise, and other taxes and revenue charges shall be paid by the supplier.
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.



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 <sup>1</sup>

- *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.*



# List of Eligibility Documents

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

<b>DTI Certificate</b>	DTI Certificate Number : 2209456 Issued By / Signatory : RAMON M. LOPEZ Registration Date : 01-Oct-2020 Expiration Date : 01-Oct-2025
<b>Mayors Permit</b>	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
<b>Tax Clearance</b>	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
<b>Audited Financial Statement</b>	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
<b>PCAB License</b>	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**

KNOW 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: <b>Renew</b>	Permit Number: <b>888-0345</b>	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 undertaking



## Omnibus Sworn Statement

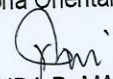
Republic of the Philippines)  
Province of Or. Mindoro ) SS  
Municipality of Victoria )

### 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 Drugs and Medicines for the University Clinic at MinSU Bongabong 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 Drugs and Medicines for the University Clinic at MinSu Bongabong 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 29<sup>th</sup> day of April 2024, at Victoria Oriental Mindoro, Philippines.

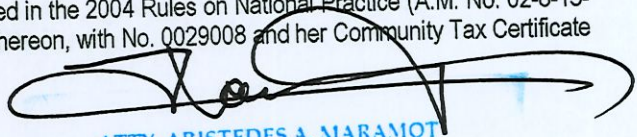
  
YOLANDA D. MATANGUIHAN  
Affiant

### ACKNOWLEDGEMENT

SUBSCRIBE AND SWORN to before me this 29<sup>th</sup> day of April, 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 No. 0029008 and her Community Tax Certificate No. 15667745 issued on January 10, 2024 at Victoria, Oriental Mindoro, Philippines.

Witness my hand and seal this 29<sup>th</sup> day of April, 2024.

Doc. No. 159  
Page No. 33  
Book No. LXI  
Series of 2024

  
ATTY. ARISTEDES A. MARAMOT  
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



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: 063RC2022000002713

Date OCN Generated: July 18, 2022

UPDATED ON JUL 18 2022

**CERTIFICATE OF REGISTRATION**

<b>TIN &amp; BRANCH CODE</b> 129-326-144-00000	<b>NAME OF TAXPAYER</b> MATANGUIHAN, YOLANDA DIMAANO	<b>TIN ISSUANCE DATE</b> October 1, 2007
<b>REGISTERING OFFICE</b>	X Head Office	Branch
<b>REGISTERED ADDRESS</b> 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



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: 063RC2022000002713  
Date OCN Generated: July 18, 2022  
UPDATED ON **18** 2022

**CERTIFICATE OF REGISTRATION**

<b>TIN &amp; BRANCH CODE</b> 129-326-144-00000		<b>NAME OF TAXPAYER</b> MATANGUIHAN, YOLANDA DIMAANO		<b>TIN ISSUANCE DATE</b> October 1, 2007	
<b>REGISTERING OFFICE</b>		X	Head Office		Branch
<b>REGISTERED ADDRESS</b> POBLACION I 5205 VICTORIA ORIENTAL MINDORO PHILIPPINES					
				January 15 of the succeeding year.	
<b>TAXPAYER TYPE/S</b> SINGLE PROPRIETORSHIP ONLY (RESIDENT CITIZEN)					
<b>BUSINESS INFORMATION DETAILS</b>					
		<b>CATEGORY</b>		<b>REGISTRATION DATE</b>	
<b>TRADE NAME 1</b>	<b>CPA PHARMACY</b>			October 1, 2007	
<b>(PSIC)</b>	46594-WHOLESALE OF PROFESSIONAL AND SCIENTIFIC AND MEASURING AND CONTROLLING EQUIPMENT	Secondary			
<b>Line of Business</b>	WHOLESALE OF PROFESSIONAL AND SCIENTIFIC AND MEASURING AND CONTROLLING EQUIPMENT				
<b>(PSIC)</b>	47722-RETAIL SALE OF MEDICAL, SURGICAL AND ORTHOPEDIC GOODS/INSTRUMENTS AND DENTAL SUPPLIES	Primary			
<b>Line of Business</b>	RETAIL SALE OF MEDICAL, SURGICAL AND ORTHOPEDIC GOODS/INSTRUMENTS AND DENTAL SUPPLIES				
<b>(PSIC)</b>	47720-RETAIL SALE OF PHARMACEUTICAL AND MEDICAL GOODS, COSMETIC AND TOILET ARTICLES IN SPECIALIZED STORES	Secondary			
<b>Line of Business</b>	RETAIL SALE OF OTHER GOODS IN SPECIALIZED STORES				
<b>(PSIC)</b>	46429-WHOLESALE OF MISCELLANEOUS CONSUMER GOODS, N.E.C.	Secondary			
<b>Line of Business</b>	WHOLESALE OF HOUSEHOLD GOODS				
<b>(PSIC)</b>	47739-OTHER RETAIL SALE OF NEW GOODS IN SPECIALIZED STORES, N.E.C.	Secondary			
<b>Line of Business</b>	RETAIL SALE OF OTHER GOODS IN SPECIALIZED STORES				

**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  
KAWANIHAN NG RENTAS INTERNAS

REVENUE REGION NO. 09A - CABAMIRO (CAVITE-BATANGAS-MINDORO-ROMBLON)  
REVENUE DISTRICT OFFICE NO. 063 - CALAPAN, ORIENTAL MINDORO

OCN: 063RC2022000002713  
Date OCN Generated: July 18, 2022

UPDATED ON JUL 18 2022

**CERTIFICATE OF REGISTRATION**

<b>TIN &amp; BRANCH CODE</b> 129-326-144-00000	<b>NAME OF TAXPAYER</b> MATANGUIHAN, YOLANDA DIMAANO	<b>TIN ISSUANCE DATE</b> October 1, 2007
<b>REGISTERING OFFICE</b>	X Head Office	Branch
<b>REGISTERED ADDRESS</b> 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.



**MERIAN Z. ROMERO**  
CHIEF CLIENT SUPPORT SECTION

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

**EMELITA R. ABO**

REVENUE DISTRICT OFFICER  
(Signature over Printed Name)

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





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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.	: 422400059270424
Amount Payable (Over Remittance)	: 1,482.00
Accounting Type	: C - Calendar
For Tax Period	: 03/31/2024
Quarter	: 1
Date Filed	: 04/21/2024
Tax Type	: IT

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Bureau of Internal Revenue  
Republic of the Philippines

BIR eFPS has received the payment confirmation for your tax return from SBTC.

TIN	129 - 326 - 144 - 000
Taxpayer's Name	MATANGUIHAN, YOLANDA DIMAANO
Tax Type	IT
Return Period	03/31/2024
Transacting Bank	SBTC (027000)
Reference Number	422400059270424
Payment Transaction Number	241063301
Payment Transaction Date	04/21/2024
Actual Amount Paid	1482.00
SBTC's Confirmation Number	BI-042124-90050
Please refer to the Tax Return Inquiry facility to check the status of your payment.	

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Reference No:422400059270424


Date Filed:April 21 2024 04:18 PM

Batch Number:0



1701Q 01/18ENCS P1

For BIR Use Only BCS/Item

 <b>Republika ng Pilipinas</b> <b>Kagawaran ng Pananalapi</b> <b>Kawanihan ng Rentas</b> <b>Internas</b>		<b>Quarterly Income Tax Return</b> <b>For Individuals, Estates and Trusts</b> <small>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.</small>		<b>BIR Form No.</b> <b>1701Q</b> <small>January 2018 (ENCS)</small> <b>Page 1</b>	
<b>1</b> For the Year (YYYY) <b>2024</b>		<b>2</b> Quarter <input checked="" type="radio"/> 1st <input type="radio"/> 2nd <input type="radio"/> 3rd		<b>3</b> Amended Return? <input type="radio"/> Yes <input checked="" type="radio"/> No	
				<b>4</b> Number of Sheet/s Attached <b>0</b>	
<b>Part I – Background Information on Taxpayer/Filer</b>					
<b>5</b> Taxpayer Identification Number (TIN) 129 - 326 - 144 - 000				<b>6</b> RDO Code 063	
<b>7</b> Taxpayer/Filer Type <input checked="" type="radio"/> Single Proprietor <input type="radio"/> Professional <input type="radio"/> Estate <input type="radio"/> Trust					
<b>8</b> Alphanumeric Tax Code (ATC) <input checked="" type="radio"/> II012 Business Income–Graduated IT Rates <input type="radio"/> II014 Income from Profession–Graduated IT Rates <input type="radio"/> II013 Mixed Income–Graduated IT Rates <input type="radio"/> II015 Business Income–8% IT Rate <input type="radio"/> II017 Income from Profession–8% IT Rate <input type="radio"/> II016 Mixed Income–8% IT Rate					
<b>9</b> 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					
<b>10</b> 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) PUBLIC MARKET OR. MINDORO					
				<b>10A</b> ZIP Code 5205	
<b>11</b> Date of Birth (MM/DD/YYYY) 09/15/1963		<b>12</b> Email Address ydmatanguihan_cpa@yahoo.com			
<b>13</b> Citizenship FILIPINO		<b>14</b> Foreign Tax Number (if applicable)		<b>15</b> Claiming Foreign Tax Credits? <input type="radio"/> Yes <input checked="" type="radio"/> No	
<b>16</b> Tax Rate* (choose one, for income from business/profession) <input checked="" type="radio"/> Graduated Rates per Tax Table – page 2 Choose Method of Deduction in Item 16A) <input type="radio"/> 8% on gross sales/receipts & other non-operating income in lieu of Graduated Rates under Sec. 24(A)(2)(a) & Percentage Tax under Sec. 116 of the NIRC, as amended [available if gross sales/receipts and other non-operating income do not exceed Three Million Pesos (P 3M)]					
<b>16A</b> Method of Deduction <input checked="" type="radio"/> Itemized Deduction [Sec. 34(A-J), NIRC] <input type="radio"/> Optional Standard Deduction (OSD) [40% of Gross Sales/Receipts/Revenues/Fees [Sec. 34(L), NIRC]]					
<b>Part II – Background Information on Spouse (if applicable)</b>					
<b>17</b> Spouse's TIN 129 - 326 - 144 - 000				<b>18</b> RDO Code	
<b>19</b> Filer's Spouse Type <input type="radio"/> Single Proprietor <input type="radio"/> Professional <input type="radio"/> Compensation Earner					
<b>20</b> ATC <input type="radio"/> II012 Business Income–Graduated IT Rates <input type="radio"/> II014 Income from Profession–Graduated IT Rates <input type="radio"/> II013 Mixed Income–Graduated IT Rates <input type="radio"/> II011 Compensation Income <input type="radio"/> II015 Business Income–8% IT Rate <input type="radio"/> II017 Income from Profession–8% IT Rate <input type="radio"/> II016 Mixed Income–8% IT Rate					
<b>21</b> Spouse's Name (Last Name, First Name, Middle Name)					
<b>22</b> Citizenship		<b>23</b> Foreign Tax Number, if applicable		<b>24</b> Claiming Foreign Tax Credits? <input type="radio"/> Yes <input type="radio"/> No	
<b>25</b> Tax Rate* (choose one, for income from business/profession) <input type="radio"/> Graduated Rates per Tax Table – page 2 Choose Method of Deduction in Item 25A) <input type="radio"/> 8% on gross sales/receipts & other non-operating income in lieu of Graduated Rates under Sec. 24(A)(2)(a) & Percentage Tax under Sec. 116 of the NIRC, as amended [available if gross sales/receipts and other non-operating income do not exceed Three Million Pesos (P 3M)]					
<b>25A</b> Method of Deduction <input type="radio"/> Itemized Deduction [Sec. 34(A-J), NIRC] <input type="radio"/> Optional Standard Deduction (OSD) [40% of Gross Sales/Receipts/Revenues/Fees [Sec. 34(L), NIRC]]					



61 Other Tax Credits/Payments (specify)		0	0
		Add	Delete
		Upload Attachment	
62 Total Tax Credits/Payments (Sum of Items 55 to 61) (To Part III, Item 27)		0	0
63 Tax Payable/(Overpayment) (Item 46 or 54, Less Item 62) (To Part III, Item 28)		1,482	0
<b>Schedule IV – Penalties</b>			
64 Surcharge		0	0
65 Interest		0	0
66 Compromise		0	0
67 Total Penalties (Sum of Items 64 to 66) (To Part III, Item 29)		0	0
68 Total Amount Payable/(Overpayment) (Sum of Items 63 and 67) (To Part III, Item 30)		1,482	0
<b>TABLE 1 – Tax Rates (effective January 1, 2018 to December 31, 2022)</b>		<b>TABLE 2 – Tax Rates (effective January 1, 2023 and onwards)</b>	
<b>If Taxable Income is:</b>	<b>Tax Due is:</b>	<b>If Taxable Income is:</b>	<b>Tax Due is:</b>
Not over ₱250,000	0%	Not over ₱250,000	0%
Over ₱250,000 but not over ₱400,000	20% of the excess over ₱250,000	Over ₱250,000 but not over ₱400,000	15% of the excess over ₱250,000
Over ₱400,000 but not over ₱800,000	₱30,000 + 25% of the excess over ₱400,000	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	₱130,000 + 30% of the excess over ₱800,000	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	₱490,000 + 32% of the excess over ₱2,000,000	Over ₱2,000,000 but not over ₱8,000,000	₱402,500 + 30% of the excess over ₱2,000,000
Over ₱8,000,000	₱2,410,000 + 35% of the excess over ₱8,000,000	Over ₱8,000,000	₱2,202,500 + 35% of the excess over ₱8,000,000
<b>Attachments</b>			
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		Remove Attachment	

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Reference No:422400059270424  
Date Filed:April 21 2024 04:18 PM  
Batch Number:0

BIR Form No. <b>1701Q</b> January 2018 (ENCS) Page 2		<b>Quarterly Income Tax Return</b> For Individuals, Estates and Trusts		 1701Q 01/18ENCS P2	
TIN 129 - 326 - 144 - 000			Taxpayer/Filer's Last Name MATANGUIHAN, YOLANDA DIMAANO		
<b>PART V – COMPUTATION OF TAX DUE</b> (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					
<b>Schedule I – For Graduated IT Rate</b>					
36 Sales/Revenues/Receipts/Fees (net of sales returns, allowances and discounts)				1,029,523	0
37 Less: Cost of Sales/Services (applicable only if availing Itemized Deductions)				658,208	0
38 Gross Income/(Loss) from Operation (Item 36 Less Item 37)				371,315	0
Less: Allowable Deductions					
39 Total Allowable Itemized Deductions				111,435	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)				259,880	0
Add: 42 Taxable Income/(Loss) Previous Quarter/s				0	0
43 Non-Operating Income (specify)				0	0
				Add	Delete
44 Amount Received/Shared in Income by a Partner from General Professional Partnership (GPP)				0	0
45 Total Taxable Income/(Loss) To Date (Sum of Items 41 to 44)				259,880	0
46 TAX DUE (Item 45 × Applicable Tax Rate based on Tax Table below) (To Part III, Item 26)				1,482	0
<b>Schedule II – For 8% IT Rate</b>					
47 Sales/Revenues/Receipts/Fees (net of sales returns, allowances and discounts)				0	0
48 Add: Non-Operating Income (specify)				0	0
				Add	Delete
49 Total Income for the quarter (Sum of Items 47 and 48)				0	0
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
<b>Schedule III – Tax Credits/Payments</b>					
55 Prior Year's Excess Credits				0	0
56 Tax Payment/s for the Previous Quarter/s				0	0
57 Creditable Tax Withheld for the Previous Quarter/s				0	0
58 Creditable Tax Withheld per BIR Form No. 2307 for this Quarter				0	0
59 Tax Paid in Return Previously Filed, if this is an Amended Return				0	0
60 Foreign Tax Credits, if applicable				0	0



Part III – Total Tax Payable <small>(DO NOT enter Centavos; 49 Centavos or Less drop down; 50 or more round up)</small>		
Particulars	A) Taxpayer/Filer	B) Spouse
26 Tax Due <small>(From Part V, Schedule I-Item 46 OR Schedule II-Item 54)</small>	1,482	0
27 Less: Tax Credits/Payments <small>(From Part V, Schedule III-Item 62)</small>	0	0
28 Tax Payable/(Overpayment) <small>(Item 26 Less Item 27) (From Part V, Item 63)</small>	1,482	0
29 Add: Total Penalties <small>(From Part V, Schedule IV-Item 67)</small>	0	0
30 Total Amount Payable/(Overpayment) <small>Sum of Items 28 and 29 (From Part V, Item 68)</small>	1,482	0
31 Aggregate Amount Payable/(Overpayment) <small>(Sum of Item 30A and 30B)</small>		1,482

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 <small>(specify below)</small>				

Machine Validation/Revenue Official Receipt Details <small>(if not filed with an Authorized Agent Bank)</small>	Stamp of receiving Office/AAB and Date of Receipt <small>(RO's Signature/Bank Teller's Initial)</small>
---	--

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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.	: 102400059270330
Amount Payable (Over Remittance)	: 2,962.78
Accounting Type	: C - Calendar
For Tax Period	: 03/31/2024
Quarter	: 1
Date Filed	: 04/21/2024
Tax Type	: VT

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**efps**

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Bureau of Internal Revenue  
Republic of the Philippines

BIR eFPS has received the payment confirmation for your tax return from SBTC.

TIN	129 - 326 - 144 - 000
Taxpayer's Name	MATANGUIHAN, YOLANDA DIMAANO
Tax Type	VT
Return Period	03/31/2024
Transacting Bank	SBTC (027000)
Reference Number	102400059270330
Payment Transaction Number	241063184
Payment Transaction Date	04/21/2024
Actual Amount Paid	2962.78
SBTC's Confirmation Number	BI-042124-90047
Please refer to the Tax Return Inquiry facility to check the status of your payment.	

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Reference No:102400059270330  
Date Filed:April 21, 2024 03:43 PM  
Batch Number:0

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)

<b>1</b> For the Year Ended (MM/YYYY) <input checked="" type="radio"/> Calendar <input type="radio"/> Fiscal December ▾ 202	<b>2</b> Quarter <input checked="" type="radio"/> 1st <input type="radio"/> 2nd <input type="radio"/> 3rd <input type="radio"/> 4th	<b>3</b> Return Period (MM/DD/YYYY) From To 01/01/2024 03/31/2024	<b>4</b> Amended Return? <input type="radio"/> Yes <input checked="" type="radio"/> No	<b>5</b> Short Period Return? <input type="radio"/> Yes <input checked="" type="radio"/> No
<b>6</b> TIN 129 326 144 000	<b>7</b> RDO Code 063	<b>8</b> No. of sheets attached 0	<b>9</b> Line of Business	WHOLESALE OF MISCELLANEOUS
<b>10</b> Taxpayer's Name (For Individual) Last Name, First Name, Middle Name/ (For Non-individual) Registered Name MATANGUIHAN, YOLANDA DIMAANO				<b>11</b> Telephone Number
<b>12</b> Registered Address PUBLIC MARKET OR. MINDORO				<b>13</b> Zip Code 5205
<b>14</b> Are you availing of tax relief under Special Law or International Tax Treaty? <input type="radio"/> Yes <input checked="" type="radio"/> No If yes, please specify				

**PART II****Computation of Tax**

Sales/Receipts for the Quarter (Exclusive of VAT)		Output Tax Due for the Quarter	
<b>15</b> Vatable Sales/Receipt - Private (see Sch. 1 )	<b>15A</b> 0.00	<b>15B</b> 0.00	
<b>16</b> Sale to Government	<b>16A</b> 919,216.96	<b>16B</b> 110,306.04	
<b>17</b> Zero Rated Sales/Receipts	<b>17</b> 0.00		
<b>18</b> Exempt Sales/Receipts	<b>18</b> 0.00		
<b>19</b> Total Sales/Receipts and Output Tax Due	<b>19A</b> 919,216.96	<b>19B</b> 110,306.04	
<b>20</b> Less: Allowable Input Tax			
<b>20A</b> Input Tax Carried Over from Previous Period		<b>20A</b> 0.00	
<b>20B</b> Input Tax Deferred on Capital Goods Exceeding P1Million from Previous Quarter		<b>20B</b> 0.00	
<b>20C</b> Transitional Input Tax		<b>20C</b> 0.00	
<b>20D</b> Presumptive Input Tax		<b>20D</b> 0.00	
<b>20E</b> Others		<b>20E</b> 0.00	
<b>20F</b> Total (Sum of Item 20A, 20B, 20C, 20D & 20E)		<b>20F</b> 0.00	
<b>21</b> Current Transactions			
Purchases			
<b>21A/B</b> Purchase of Capital Goods not exceeding P1Million (see Sch. 2 )	<b>21A</b> 0.00	<b>21B</b> 0.00	
<b>21C/D</b> Purchase of Capital Goods exceeding P1Million (see Sch. 3 )	<b>21C</b> 0.00	<b>21D</b> 0.00	
<b>21E/F</b> Domestic Purchases of Goods Other than Capital Goods	<b>21E</b> 477,022.60	<b>21F</b> 57,242.71	
<b>21G/H</b> Importation of Goods Other than Capital Goods	<b>21G</b> 0.00	<b>21H</b> 0.00	
<b>21I/J</b> Domestic Purchase of Services	<b>21I</b> 34,497.62	<b>21J</b> 4,139.71	
<b>21K/L</b> Services Rendered by Non-residents	<b>21K</b> 0.00	<b>21L</b> 0.00	
<b>21M</b> Purchases Not Qualified for Input Tax	<b>21M</b> 141,681.55		
<b>21N/O</b> Others	<b>21N</b> 0.00	<b>21O</b> 0.00	
<b>21P</b> Total Current Purchases (Sum of Item 21A, 21C, 21E, 21G, 21I, 21K, 21M & 21N)	<b>21P</b> 653,201.77		
<b>22</b> Total Available Input Tax (Sum of Item 20F, 21B, 21D, 21F, 21H, 21J, 21L & 21O)		<b>22</b> 61,382.42	
<b>23</b> Less: Deductions from Input Tax			
<b>23A</b> Input Tax on Purchases of Capital Goods exceeding P1Million deferred for the succeeding period (see Sch. 3 )		<b>23A</b> 0.00	
<b>23B</b> Input Tax on Sale to Gov't. closed to expense (see Sch. 4 )		<b>23B</b> 0.00	



<b>23C</b>	Input Tax allocable to Exempt Sales (see Sch. 5 )	<b>23C</b>	0.00
<b>23D</b>	VAT Refund / TCC claimed	<b>23D</b>	0.00
<b>23E</b>	Others	<b>23E</b>	0.00
<b>23F</b>	Total (Sum of Item 23A, 23B, 23C, 23D & 23E)	<b>23F</b>	0.00
<b>24</b>	Total Allowable Input Tax (Item 22 less Item 23F)	<b>24</b>	61,382.42
<b>25</b>	Net VAT Payable (item 19B less Item 24)	<b>25</b>	48,923.62
<b>26</b>	Less: Tax Credits/Payments		
<b>26A</b>	Monthly VAT Payments - previous two months	<b>26A</b>	0.00
<b>26B</b>	Creditable Value-Added Tax Withheld (see <a href="#">Sch. 6</a> )	<b>26B</b>	45,960.84
<b>26C</b>	Advance Payment for Sugar and Flour Industries (see Sch. 7 )	<b>26C</b>	0.00
<b>26D</b>	VAT withheld on Sales to Government (see Sch. 8 )	<b>26D</b>	0.00
<b>26E</b>	VAT paid in return previously filed, if this is an amended return	<b>26E</b>	0.00
<b>26F</b>	Advance Payments made (please attach proof of payments - BIR Form No. 0605)	<b>26F</b>	0.00
<b>26G</b>	Others	<b>26G</b>	0.00
<b>26H</b>	Total Tax Credits/Payments(Sum of Item 26A, 26B, 26C, 26D, 26E, 26F, & 26G)	<b>26H</b>	45,960.84
<b>27</b>	Tax Still Payable/ (Overpayment) (Item 25 less Item 26H)	<b>27</b>	2,962.78
<b>28</b>	Add: Penalties		
	Surcharge	Interest	Compromise
<b>28A</b>	0.00	<b>28B</b>	0.00
		<b>28C</b>	0.00
<b>28D</b>			0.00
<b>29</b>	Total Amount Payable (Overpayment) (Sum of Item 27 & 28D)	<b>29</b>	2,962.78

## Attachments

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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.



*Amihan L. Valdez*  
**AMIHAN L. VALDEZ**  
Asst. Chief, Collection Division  
Officer-in-Charge

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](http://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 Drugs and Medicines for the University Clinic at MinSU Bongabong Campus**  
**Labasan, Bongabong, 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		
									%	VALUE		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
										(5)X(9)	(10%[(5)+(10)]	(11) / (3)
1	Acetylcysteine 600mg	400	tabs	33.00	13,200.00							
2	Aluminum Hydroxide + magnesium Hydroxide 200mg + 100mg	500	tabs	1.85	925.00							
3	Amlopedine Besilate 5mg	100	tabs	4.50	450.00							
4	Amoxicillin 500mg	1000	tabs	6.00	6,000.00							
5	Ascorbic Acid (Vit. C) 500mg	2000	tabs	4.00	8,000.00							
6	Azithromycin 500mg	150	tabs	79.67	11,950.50							
7	Betahistine 24mg	200	tabs	42.50	8,500.00							
8	cefuroxime 500mg	500	tabs	44.00	22,000.00							
9	Co-Amoxiclav 625mg	1000	tabs	19.00	19,000.00							
10	Plain NSS 500ml	5	Bottle	100.00	500.00							
11	D5 Water 500ml	5	Bottle	93.90	469.50							
12	Domperidone 10mg	200	tabs	15.00	3,000.00							
13	Erythromycin 0.5% 5g (eye oinment)	10	tube	179.50	1,795.00							
14	Hydrogen Peroxide 3% 120ml	10	Bottle	38.00	380.00							
15	HyOsine -N Butylbromide 10mg	200	tabs	6.20	1,240.00							
16	Hypromellose 0.3% 10ml	10	Bottle	298.00	2,980.00							
17	Ibuprofen 400mg	500	tablet	3.10	1,550.00							
18	Iagundi (vitex Negundo L) 600mg	3000	tablet	3.35	10,050.00							
19	Loperamide 2mg	300	capsule	3.80	1,140.00							
20	Loratadine 10mg	500	tablet	9.00	4,500.00							
21	Losartan potassium 50mg	100	tablet	9.00	900.00							
22	Mebendazole 500mg chewable	30	tablet	2.85	85.50							
23	Mefenamic Acid 500mg	500	tablet	36.25	18,125.00							
24	Multivitamins	3000	capsule	4.90	14,700.00							
25	Mupirocin Ointment 2% 5g	20	tube	179.50	3,590.00							
26	Omeprazole 20mg	200	capsule	19.10	3,820.00							
27	paracetamol 500mg	4000	tab	2.25	9,000.00							









Republic of the Philippines  
**MINDORO STATE UNIVERSITY**  
Bongabong Campus  
Labasan, Bongabong, Oriental Mindoro



## PURCHASE REQUEST

Fund Cluster:

Office/Section :		PR No.: 2024-050		Date: April 3, 2024	
		Responsibility Center Code :			
Stock/ Property	Unit	Item Description	Qty	Unit Cost	Total Cost
1	Tabs	Acetylcysteine 600mg	400	33.00	13,200.00
2	Tabs	Aluminum Hydroxide + magnesium Hydroxide 200mg + 100mg	500	1.85	925.00
3	Tabs	Amlodipine Besilate 5mg	100	4.50	450.00
4	Tabs	Amoxicillin 500mg	1000	6.00	6,000.00
5	tabs	Ascorbic Acid (Vit.C) 500mg	2000	4.00	8,000.00
6	Tabs	Azithromycin 500mg	150	79.67	11,950.50
7	Tabs	Betahistine 24mg	200	42.50	8,500.00
8	Tabs	Cefuroxime 500mg	500	44.00	22,000.00
9	Tabs	Co- Amoxiclav 625mg	1000	19.00	19,000.00
10	Bottle	Plain NSS 500ml	5	100.00	500.00
11	Bottle	D5 Water 500ml	5	93.90	469.50
12	Tabs	Domperidone 10mg	200	15.00	3,000.00
13	Tube	Erythromycin 0.5% 5g ( eye ointment)	10	179.50	1,795.00
14	Bottle	Hydrogen Peroxide 3% 120ml	10	38.00	380.00
15	Tabs	Hyosine-N Butylbromide 10mg	200	6.20	1,240.00
16	Bottle	Hypromellose 0.3% 10ml	10	298.00	2,980.00
17	Tablet	Ibuprofen 400mg	500	3.10	1,550.00
18	Tablet	Lagundi (Vitex Negundo L) 600mg	3000	3.35	10,050.00
19	Capsule	Loperamide 2mg	300	3.80	1,140.00
20	Tablet	Loratidine 10mg	500	9.00	4,500.00
21	Tablet	Losartan Potassium 50mg	100	9.00	900.00
22	Tablet	Mebendazole 500mg chewable	30	2.85	85.50
23	Tablet	Mefenamic Acid 500mg	500	36.25	18,125.00
24	Capsule	Multivitamins	3000	4.90	14,700.00
25	Tube	Mupirocin Ointment 2% 5g	20	179.50	3,590.00
26	Capsule	Omeprazole 20mg	200	19.10	3,820.00
27	Tablet	Paracetamol 500mg	4000	2.25	9,000.00
28	Bottle	Povidone Iodine Wound Solution 10% 120ml	10	45.00	450.00
29	Bottle	Povidone Iodine oral gargle 1% 120ml	10	153.45	1,534.50
30	Tube	Salbutamol Nebule 1mg/ml 2.5ml	20	18.00	360.00
31	Capsule	Tranexamic Acid 500mg	500	48.99	24,495.00
32	Bottle	Calamine Lotion 8% 60ml	21	110.00	2,310.00
33	Tablet	Cotrimoxazole 800mg/160mg tablet	500	3.90	1,950.00
34	Tablet	Clonidine 75mcg	20	52.50	1,050.00
<b>GRAND TOTAL</b>					<b>200,000.00</b>

Purpose:

drugs & medicines for college clinic

MDS-14-7  
101-200 - 04-119  
5020307000

<p>Requested by:</p> <p>Signature : </p> <p>Printed Name : <b>JOANNE MARIE O. SAPINT</b></p> <p>Designation : <b>Nurse II</b></p>	<p>Recommending Approval:</p> <p></p> <p><b>CIEDELLE P. SALAZAR, Ph.D.</b></p> <p><b>Campus Executive Director</b></p>	<p>Certified Allotment Available:</p> <p></p> <p><b>ROVELYN P. ROXAS</b></p> <p><b>Budget Officer III</b></p>
<p>Approved by:</p> <p></p> <p><b>CHRISTIAN ANTHONY C. AGUTAYA, Ph.D.</b></p> <p><b>OIC -University President</b></p>		



DRUGS AND MEDICINE (MBC)					
• Acetylcysteine 600mg (effervescent tablet)	tabs	400	33	13,200.00	
• Aluminum Hydroxide + Magnesium Hydroxide 200mg + 100mg	boxes	5	185	925.00	
• Amlodipine Besilate 5mg	tabs	100	4.5	450.00	
• Amoxicillin 500mg	boxes	10	600	6,000.00	
• Ascorbic Acid (Vitamin C) 500mg	boxes	20	400	8,000.00	
• Azithromycin 500mg	tabs	150	79.67	11,950.50	
• Betahistine 24mg	boxes	2	4250	8,500.00	
• Calamine Lotion 8% 60ml	bottle	21	110	2,310.00	
• Cefuroxime 500mg	tabs	500	44	22,000.00	
• Clonidine 75mcg	tablet	20	52.5	1,050.00	
• Co-Amoxiclav 625mg	tabs	1000	19	19,000.00	
• Cotrimoxazole 800mg/160mg tablet	boxes	5	390	1,950.00	
• D5 Water 500ml	bottle	5	93.9	469.50	
• Domperidone 10mg	boxes	2	1500	3,000.00	
• Erythromycin 0.5% 5g (eye ointment)	tube	10	179.5	1,795.00	
• HyOsine-N Butylbromide 10mg	boxes	2	620	1,240.00	
• Hydrogen Peroxide 3% 120ml	bottle	10	38	380.00	
• Hypromellose 0.3% 10ml	bottle	10	298	2,980.00	
• Ibuprofen 400mg	boxes	5	310	1,550.00	
• Lagundi (Vitex Negundo L.) 600mg	boxes	30	335	10,050.00	
• Loperamide 2mg	boxes	3	380	1,140.00	
• Loratadine 10mg	boxes	5	900	4,500.00	
• Losartan Potassium 50mg	tablet	100	9	900.00	
• Mebendazole 500mg chewable	tablet	30	2.85	85.50	
• Mefenamic Acid 500mg capsule	boxes	5	3625	18,125.00	
• Multivitamins	boxes	30	490	14,700.00	
• Mupirocin ointment 2% 5g	tube	20	179.5	3,590.00	
• Omeprazole 20mg	boxes	2	1910	3,820.00	
• Paracetamol 500mg	boxes	40	225	9,000.00	