



SUPPLY AND DELIVERY OF AQUA RESIGEN FOR MISTING PROGRAM AT MinSU MAIN CAMPUS

Name of Project

**BAC Resolution Recommending Approval
Resolution No. 12, s. 2025**

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) No. 2025-03 for the project "Supply and Delivery of Aqua Resigen for Misting Program at MinSU Main Campus" with an Approved Budget for the Contract (ABC) amounting to Fifty-Six Thousand Four Hundred Pesos (Php56,400.00);

WHEREAS, in response to the advertisement of the project, three (3) suppliers/bidders were found in the document request list, however two (2) supplier/bidder in the name of CPA PHARMACY and PAPERCAT OFFICE SUPPLIES & EQUIPMENT TRADING 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
Php56,400.00	CPA Pharmacy	Php51,600.00
	Papercat Office Supplies & Equipment Trading	Php56,376.00

WHEREAS, the BAC examined and verified the price quotation submitted by the abovementioned suppliers and were found to be complying and responsive;

NOW, THEREFORE, BE IT RESOLVED that the BAC hereby recommends to the Head of Procuring Entity the approval of awarding the contract involving the project, "Supply and Delivery of Aqua Resigen for Misting Program at MinSU Main Campus" as follows:

- a. to CPA Pharmacy for being the supplier/bidder with the Lowest Calculated Responsive Bid (LCRB);

RESOLVED, this 10th day of February, 2025 at MinSU-Main Campus, Alcate, Victoria, Oriental Mindoro,


CIEDELLE P. SALAZAR, J.D., Ph.D
BAC Chairperson



Engr. MARK LESTER A. MAGPANTAY
BAC Vice-Chairperson


ATTY. SHERLYN A. LAYESA
BAC Member


FRANIE M. AFABLE, DBMHM
BAC Member


MELGAR G. FADRIQUELAN
BAC Member

Approved/Disapproved


ENYA MARIE D. APOSTOL, Ph.D.
SUC President III

Date: _____



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



I. Particulars

Project Name: SUPPLY AND DELIVERY OF AQMA RESIDEN FOR MISTING PROGRAM AT MINSU MAIN CAMPUS

Project Location: MINSU MAIN CAMPUS

Implementing Office: _____
Method of Procurement: _____

Method of Procurement:
Approved Budget for the Contract (ABC): P 56,400.00

Deadline of Submission of Quotation:

III. Abstract of Quotations / for SVP

Evaluation of Document/s Required to be Submitted within the deadline specified in the RFQ:

Date: _____

[illegible]

III. Recommendation /Resolution

☐ Recommend to Award Contract

Date: February 05, 2025 - grind completed on 2/10/25

Contract Price Award (in words & figures):

CPA Pharmacy

Fifty one thousand six hundred pesos (\$51,600.00)

☐ Declaration of Failure under Section 35 of Revised IRR of RA 9184

<input type="checkbox"/>	All prospective bidders are declared ineligible [Sec. 35.1(b)]	<input type="checkbox"/>	All bids failed to comply with all the bid requirements or fail post-qualification [Sec. 35.1(c)]
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Date:

LINA B. JAVIER
TWG Member

MAY C. BERON
TWG Member

FELIX A. MINESTERIO
TWG Member

Engr. MARK KEYLORD S. ONAL
BAC-TWG Head

Proceed only if recommended for award of contract

2025-08-05



PhilGEPS

Philippine Government Electronic Procurement System

**Central Portal for
Philippine Government
Procurement Opportunities**

Bid Notice Abstract

Request for Quotation (RFQ)

Reference Number	11711844
Procuring Entity	MINDORO STATE UNIVERSITY
Title	Supply and Delivery of Aqua Resigen for Misting Program at MinSU Main Campus
Area of Delivery	Oriental Mindoro

Solicitation Number:	RFQ No. 2025-03	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	3
Category:	Chemicals and Chemical Products	Date Published	01/02/2025
Approved Budget for the Contract:	PHP 56,400.00	Last Updated / Time	01/02/2025 00:00 AM
Delivery Period:	30 Day/s	Closing Date / Time	04/02/2025 17:00 PM
Client Agency:			
Contact Person:	Christian B. Apostol BAC Secretariat Head Alcate Victoria Oriental Mindoro Philippines 5205 63-43-2862368 cbapotel21@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.

CIEDELLE PIOL-SALAZAR, 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	Unit	Quantity	Unit Price	Total Price
1. Material				
2. Labor				
3. Overhead				
4. Profit				
5. Total				

No.	Unit	ITEM AND DESCRIPTION	QTY.	UNIT
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PRICE TOTAL AMOUNT

1 bottles Aqua Resigen 1L 12

[illegible]

Created by Annabelle Quinto Madrigal

Date Created 31/01/2025

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.



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 Aqua Resigen for Misting Program at MinSU Main Campus

PR No.: PR24-0425

RFQ No. 2025-03

ABC Amount: Php56,400.00

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.

CIEDELLE PIOL-SALAZAR, Ph.D.

BAC Chairperson

- Note:
1. All entries must be typewritten.
 2. Delivery Period within 7 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	bottles	Aqua Resigen 1L	12	4,300.00	51,600.00
Fifty One Thousand Six Hundred Pesos			TOTAL	-	51,600.00

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

YOLANDAD. MATANGUIHAN

Supplier's Signature over Printed Name

129-326-144-00000

TIN No. of Establishment

09176562195

Contact Number

February 4, 2024

Date

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

MSU-BAC-FR-05.01



Mindoro State University
Victoria, Oriental Mindoro 5205 Philippines

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



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.

MSU-BAC-FR-05.01



Mindoro State University
Victoria, Oriental Mindoro 5205 Philippines

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Website: www.minsu.edu.ph
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REQUEST FOR QUOTATION

Supply and Delivery of Aqua Resigen for Misting Program at MinSU Main Campus

PR No.: PR24-0425

RFQ No. 2025-03

ABC Amount: Php56,400.00

Company Name : PAPERCAT OFFICE SUPPLIES & EQUIPMENT TRADING

Address : STO. NINO, CALAPAN CITY, 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.

CIEDELLE PIOL-SALAZAR, 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	bottles	Aqua Resigen 1L	12	4,698.00	56,376.00
XX					
TOTAL					56,376.00

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

MARY FRANCES DOMINIQUE DG CASTRO

Supplier's Signature over Printed Name

497-143-353-00000

TIN No. of Establishment

0908-874-3789

Contact Number

Date

MSU-BAC-FR-05.01



Mindoro State University
Victoria, Oriental Mindoro 5205 Philippines

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



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
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Price validity shall be 30 calendar days from the deadline of submission of quotation.

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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.

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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.

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2. Compliance with Item & Description Requirements
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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.
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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

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-2025

Issued this 27th day of May 2024.

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.*

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-2024 Permit Number : 888 0345 Place of Issue : VICTORIA ORIENTAL MINDORO Issued By / Signatory : JOSELITO C. MALABANAN Issuance Date : 10-Jan-2024
Tax Clearance	Expiration Date : 01-Mar-2025 TCC Number : RR9A-063-02-29-R0407-2024-E Issued By / Signatory : AMIHAN L. VALDEZ Issuance date : 29-Feb-2024
Audited Financial Statement	Date of Filing : 10-Apr-2024 Current Asset : 2,618,117.50 Total Asset : 3,255,741.50 Current Liabilities : 43,625.14 Total Liabilities : 43,625.14 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

KNOW ALL MEN BY THESE PRESENT

Pursuant to the provision of Tax Ordinance Number 06-2012, 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: 888-0156	Date of issuance: 06 Jan 2025 A	Date of Expiration: December 31, 2025
O.R. Number: 4334381	O.R. Date: 1/06/2025	Amount Paid: 32,730.00	Capital Gross Sales: 4,200,000.00
Taxpayer's Name: MATANGUIHAN, YOLANDA			
Business Name: CPA PHARMACY			
Nature of Business: <small>DRUGSTORE, MEDICAL AND DENTAL SUPPLIES AND EQUIPMENT (WHOLESALE/RETAILER) OFFICE EQUIPMENT, MACHINERY AND ELECTRONIC EQUIPMENT</small>			
Address: OLD MARKET, POBLACION I, 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:

By the Authority of the Mayor

JOSELITO C. MALABANAN
Municipal Mayor

This Franchise Permit and Official Receipt shall be displayed or posted for public viewing 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 Aqua Resigen for Misting Program at MinSU Main CampusSupply;
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 inquire or secure Supplemental/Bid Bulletin(s) issued for the Supply and Delivery of Aqua Resigen for Misting Program at MinSU Main 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 31st day of January, 2025 at Victoria Oriental Mindoro, Philippines.


YOLANDA D. MATANGUIHAN
Affiant

ACKNOWLEDGEMENT

SUBSCRIBE AND SWORN to before me this 31st day of January, 2025 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. 15791150 issued on January 6, 2025 at Victoria, Oriental Mindoro, Philippines.

Witness my hand and seal this 31st day of January, 2025.



ATTY. ARISTEDES A. MARAMOT
Notary Public
Until Dec. 31, 2026 NP No. 24-285
PTR No. 4332927/ Victoria / 01-02-25
Roll No. 41130 / April 15, 1996
IBP No. 495052 / 01-02-25 / Or. Mindoro
MCLE Compliance No. VIII-0013894
Valid Until April 14, 2028

Doc. No. 463
Page No. 04
Book No. 629
Series of 2025

Omnibus Sworn Statement

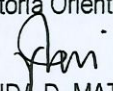
Republic of the Philippines)
Province of Or. Mindoro) SS
Municipality of Victoria)

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 Aqua Resigen for Misting Program at MinSU Main CampusSupply;
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 inquire or secure Supplemental/Bid Bulletin(s) issued for the Supply and Delivery of Aqua Resigen for Misting Program at MinSU Main 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 31st day of January, 2025 at Victoria Oriental Mindoro, Philippines.

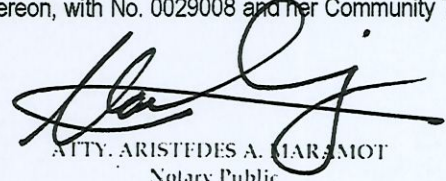

YOLANDA D. MATANGUIHAN
Affiant

ACKNOWLEDGEMENT

SUBSCRIBE AND SWORN to before me this 31st day of January, 2025 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. 15791150 issued on January 6, 2025 at Victoria, Oriental Mindoro, Philippines.

Witness my hand and seal this 31st day of January, 2025.

Doc. No. 463
Page No. 94
Book No. 544
Series of 2025


ATTY. ARISTEDES A. MARSMOT
Notary Public
Until Dec. 31, 2026 NP No. 24-285
PTR No. 4332927/ Victoria / 01-02-25
Roll No. 41130 / April 15, 1996
IBP No. 495052 / 01-02-25 / Or. Mindoro
MCLE Compliance No. VIII-0013894
Valid Until April 14, 2028

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	X 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

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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 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		X	Head Office		Branch
REGISTERED ADDRESS POBLACION I 5205 VICTORIA ORIENTAL MINDORO PHILIPPINES					
		January 15 of the succeeding year.			
TAXPAYER TYPE/S SINGLE PROPRIETORSHIP ONLY (RESIDENT CITIZEN)					
BUSINESS INFORMATION DETAILS					
TRADE NAME 1		CPA PHARMACY		CATEGORY	
(PSIC)		46594-WHOLESALE OF PROFESSIONAL AND SCIENTIFIC AND MEASURING AND CONTROLLING EQUIPMENT		October 1, 2007	
Line of Business		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		Primary	
(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

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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 ONLY 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	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.



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.	: 422400062533365
Amount Payable (Over Remittance)	: 4,619.40
Accounting Type	: C - Calendar
For Tax Period	: 09/30/2024
Date Filed	: 11/07/2024
Tax Type	: IT

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e-Filing and Payment System

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	09/30/2024
Transacting Bank	SBTC (027000)
Reference Number	422400062533365
Payment Transaction Number	244987552
Payment Transaction Date	11/07/2024
Actual Amount Paid	4619.40
SBTC's Confirmation Number	BI-110724-90426
Please refer to the Tax Return Inquiry facility to check the status of your payment.	

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Reference No: 42240006253365
Date Filed: November 07 2024 10:23 AM
Batch Number: 0



1701Q 01/18 ENCS P1

For BIR Use
Only

BCS/
Item

 Republika ng Pilipinas Kagawaran ng Pananalapi Kawanihan ng Rentas Internas		Quarterly Income Tax Return For Individuals, Estates and Trusts <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>		BIR Form No. 1701Q January 2018 (ENCS) Page 1	
1 For the Year (YYY) 2024		2 Quarter <input type="radio"/> 1st <input type="radio"/> 2nd <input checked="" type="radio"/> 3rd		3 Amended Return? <input type="radio"/> Yes <input checked="" type="radio"/> No	
				4 Number of Sheet/s Attached 0	
Part I – Background Information on Taxpayer/Filer					
5 Taxpayer Identification Number (TIN) 129 - 326 - 144 - 000		6 RDO Code 063			
7 Taxpayer/Filer Type <input checked="" type="radio"/> Single Proprietor <input type="radio"/> Professional <input type="radio"/> Estate <input type="radio"/> Trust					
8 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					
9 Taxpayer/Filer's Name (Last Name, First Name, Middle Name for Individual) / ESTATE of (First Name, Middle Name, Last Name) / TRUST FBO: (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) PUBLIC MARKET OR. MINDORO					
				10A ZIP Code 5205	
11 Date of Birth (MM/DD/YYYY) 09/15/1963		12 Email Address ydmatanguihan_cpa@yahoo.com			
13 Citizenship FILIPINO		14 Foreign Tax Number (if applicable)		15 Claiming Foreign Tax Credits? <input type="radio"/> Yes <input checked="" type="radio"/> No	
16 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)]					
16A 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]]					
Part II – Background Information on Spouse (if applicable)					
17 Spouse's TIN 129 - 326 - 144 - 000		18 RDO Code			
19 Filer's Spouse Type <input type="checkbox"/> Single Proprietor <input type="checkbox"/> Professional <input type="checkbox"/> Compensation Earner					
20 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					
21 Spouse's Name (Last Name, First Name, Middle Name)					
22 Citizenship					
23 Foreign Tax Number, if applicable		24 Claiming Foreign Tax Credits? <input type="radio"/> Yes <input checked="" type="radio"/> No			
25 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)]					
25A 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]]					

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>	49,687	0	
27	Less: Tax Credits/Payments <small>(From Part V, Schedule III-Item 62)</small>	45,068	0	
28	Tax Payable/(Overpayment) <small>(Item 26 Less Item 27) (From Part V, Item 63)</small>	4,619	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>	4,619	0	
31	Aggregate Amount Payable/(Overpayment) <small>(Sum of Item 30A and 30B)</small>	4,619		

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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Reference No:422400062533365
Date Filed:November 07 2024 10:23 AM
Batch Number:0

BIR Form No. <div style="font-size: 24pt; font-weight: bold;">1701Q</div> January 2018 (ENCS) Page 2	<div style="font-size: 24pt; font-weight: bold;">Quarterly Income Tax Return</div> For Individuals, Estates and Trusts	<div style="font-size: 10pt;">1701Q 01/18ENCS P2</div>		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 35%;"> TIN <div style="display: flex; justify-content: space-between;"> 129- 326- 144- 000 </div> </td> <td style="width: 65%;"> Taxpayer/Filter's Last Name MATANGUIHAN, YOLANDA DIMAANO </td> </tr> </table>			TIN <div style="display: flex; justify-content: space-between;"> 129- 326- 144- 000 </div>	Taxpayer/Filter's Last Name MATANGUIHAN, YOLANDA DIMAANO
TIN <div style="display: flex; justify-content: space-between;"> 129- 326- 144- 000 </div>	Taxpayer/Filter's Last Name MATANGUIHAN, YOLANDA DIMAANO			
PART V – COMPUTATION OF TAX DUE <small>(DO NOT enter Centavos; 49 Centavos or Less drop down; 50 or more round up)</small>				
Declaration this Quarter	A) Taxpayer/Filter	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)	857,830	0		
37 Less: Cost of Sales/Services (applicable only if availing Itemized Deductions)	669,492	0		
38 Gross Income/(Loss) from Operation (Item 36 Less Item 37)	188,338	0		
Less: Allowable Deductions				
39 Total Allowable Itemized Deductions	122,166	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)	66,172	0		
Add: 42 Taxable Income/(Loss) Previous Quarter/s	469,765	0		
43 Non-Operating Income (specify)	0	0		
<div style="display: flex; justify-content: flex-end; gap: 10px;"> AddDeleteUpload Attachment </div>				
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)	535,937	0		
46 TAX DUE (Item 45 × Applicable Tax Rate based on Tax Table below) (To Part III, Item 26)	49,687	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		
<div style="display: flex; justify-content: flex-end; gap: 10px;"> AddDeleteUpload Attachment </div>				
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		
Schedule III – Tax Credits/Payments				
55 Prior Year's Excess Credits	0	0		
56 Tax Payment/s for the Previous Quarter/s	10,614	0		
57 Creditable Tax Withheld for the Previous Quarter/s	22,789	0		
58 Creditable Tax Withheld per BIR Form No. 2307 for this Quarter	11,665	0		
59 Tax Paid in Return Previously Filed, if this is an Amended Return	0	0		
60 Foreign Tax Credits, if applicable	0	0		
61 Other Tax Credits/Payments (specify)	0	0		
<div style="display: flex; justify-content: flex-end; gap: 10px;"> AddDeleteUpload Attachment </div>				

62 Total Tax Credits/Payments (Sum of Items 55 to 61) <i>(To Part III, Item 27)</i>	45,068	0
63 Tax Payable/(Overpayment) (Item 46 or 54, Less Item 62) <i>(To Part III, Item 28)</i>	4,619	0
Schedule IV – Penalties		
64 Surcharge	0	0
65 Interest	0	0
66 Compromise	0	0
67 Total Penalties (Sum of Items 64 to 66) <i>(To Part III, Item 29)</i>	0	0
68 Total Amount Payable/(Overpayment) (Sum of Items 63 and 67) <i>(To Part III, Item 30)</i>	4,619	0

TABLE 1 – Tax Rates (effective January 1, 2018 to December 31, 2022)		TABLE 2 – Tax Rates (effective January 1, 2023 and onwards)	
If Taxable Income is:	Tax Due is:	If Taxable Income is:	Tax Due is:
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

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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.	: 102500063654092
Amount Payable (Over Remittance)	: 3,461.10
Accounting Type	: C - Calendar
For Tax Period	: 12/31/2024
Quarter	: 4
Date Filed	: 01/18/2025
Tax Type	: VT

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2025-004

