

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



#### SUPPLY AND DELIVERY OF SEMI-EXPENDABLE MEDICAL EQUIPMENT FOR THE UNIVERSITY CLINIC AT MINSU MAIN **CAMPUS**

Name of Project

#### **BAC Resolution Recommending Approval** Resolution No. 038, 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. 2025-032 for the project "Supply and Delivery of Semi-Expendable Medical Equipment for the University Clinic at MinSU Main Campus" with an Approved Budget for the Contract (ABC) amounting to Fifty-Three Thousand Two Hundred Pesos (Php53,200.00);

WHEREAS, in response to the advertisement of the project, four (4) suppliers/bidders were found in the document request list, however only one (1) supplier/bidder 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	Name of Bidder	Price Quotation
Contract (ABC) Php53,200.00	CPA Pharmacy	Php51,000.00

WHEREAS, the BAC examined and verified the price quotation submitted by the abovementioned supplier and was 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 Semi-Expendable Medical Equipment for the University Clinic at MinSU Main Campus" as follows:

a. to CPA Pharmacy for being the supplier/bidder with Single Calculated Responsive Bid (SCRB);

RESOLVED, this 12th day of March, 2025 at MinSU-Main Campus, Alcate, Victoria, Oriental Mindoro.

CIEDELLE P. SA LAZAR, J.D., Ph.D.

**BAC Chairperson** 

Engr. MARK LESTER A MAGPANTAY

BAC Vice-Chairperson

FRANIE M. AFABLE, DBMHM **BAC Member** 

MELGAR G. FADRIQUEL

BAC Membe

Approved/Disapproved

ENYA MARIE D. APOSTOL, Ph.D.

SUC President III

Date:



#### **Bid Notice Abstract**

#### Request for Quotation (RFQ)

**Reference Number** 

11843605

**Procuring Entity** 

MINDORO STATE UNIVERSITY

Title

SUPPLY AND DELIVERY OF SEMI-EXPENDABLE MEDICAL EQUIPMENT FOR THE UNIVERSITY CLINIC AT MINSU MAIN CAMPUS

**Area of Delivery** Oriental Mindoro

Solicitation Number:	RFQ No. 2025-032	Status	Closed
Trade Agreement:	Implementing Rules and Regulations		
Procurement Mode:	Negotiated Procurement - Small Value Procurement (Sec. 53.9)	Associated Components	
Classification:	Goods	Bid Supplements	
Category:	Medical and Dental Equipment		
Approved Budget for the Contract:	PHP 53,200.00	Document Request List	2
Delivery Period:	30 Day/s		
Client Agency:		Date Published	06/03/2025
Contact Person:	Christian B. Apostol BAC Secretariat Head Alcate Victoria	Last Updated / Time	06/03/2025 00:00 AM
	Oriental Mindoro Philippines 5205 63-43-2862368	Closing Date / Time	10/03/2025 17:00 PM
	cbapotol21@gmail.com		
the shortest time of delivery and submit your quaddress stated in the last pa CIEDELLE PIOL-SALAZAR, J. BAC Chairperson Note: 1. All entries must be 2. Delivery Period within 3. Warranty shall be for a pe of acceptance by the procuri	otation duly signed by your nage. D., Ph.D. typewritten. calendar days. priod of six (6) months for sul	o, subject to the General Condition  presentative not later than  polies and materials, one (1) year	in the
<ol><li>Bidders shall submit Origi</li></ol>	cate shall be attached upon s	cation of the product being offer	ed (optional).
No. Unit ITEM AND DESCRIP PRICE TOTAL AMOUNT 1 unit			
No. Unit ITEM AND DESCRIP PRICE TOTAL AMOUNT	scope Welch Allyn ase 1		

Created by

Annabelle Quinto Madrigal **Date Created** 05/03/2025

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# ABSTRACT OF QUOTATION/S

<u>EGFERO</u>	Project Name: &uPPty and DEINGEN OF SEWI-EX Project Location: MinSU Main Compus Implementing Office: Method of Procurement: SVP Approved Budget for the Contract (ABC): Deadline of Submission of Quoration:		DABLE ME	MEDICAL EQUIP	AMENT PR	OK THE 1	ANIVERSIT	CLINIC	AT MINS	PENGABLE MEDICAL EQUIPMENT POR THE UNINVERSITY CLINIC AT MINSU MATIN CANIPUS. P 53, 260. 00	Lot N	Lot No.:	
= ú	II. Abstract of Quotations / for SVP Evaluation of Document/s Required to be Subr TWG Report		nitted <u>within</u> Date:	the dea	dline sp	ecified in	mitted <u>within the deadline specified in the RFQ</u> Date:						I
		Date and Time of	Time of	Eligibility Requirements	bility	Tech	Technical Requirements	Fina	Financial Requirements				
2	o Participating Bidder/s	Receipt	ipt							Bid Amount	Rank	Remarks	
				Pass	Fail	Pass	Fail	Pass	Fail		_		T
-	CPA Pharmacy	\		\		\		\		\$ 51,000.00	0	SCRQ	
													T
1													T
	III. Recommendation /Resolution				٩	'Date:						e in	T
			20	C PA Pharmacu	nae		Contrac	Contract Price Award (in words & figures):	ward (in res):	Fifty-one thousand	9	housand	
	Lowest / Single Calculated and Responsive Quotation:		5	,	/						(A 21	(00-00)	77-17-1
	Declaration of Failure under Section 35 of Revised IRR of R.     All prospective hidders are declared ineligible ( Sec. 35.1(h)).	on 35 of Re	Revised IRR of RA 9184	R of RA 9	184		All bids f	failed to c	omply wit	All bids failed to comply with all the bid requirements or	nts or	fail post-qualification [Sec.	
			200	(2)			35.1( c)						П
	Date:			The state of the s				A	4			Math	
	LINA B/JAVIER TWG Member		MAN Y	MAY C. BERON TWG Member	ON Ja	C	刨	TANG M	FELIX A. MINESTERIO TWG Member	Ol	V	TWG Member	
					Engr. N	BAC-TV	Engr. MARK KEYLORD S. ONAL BAC-TWG Head	S. ONAL					
	•Main Campus, Alcate, Victoria	*Bongabong C	ampus, Laba	*Proce	il kjuo pa	recomm	anded for	award of	*Proceed only if recommended for award of contract*				1



Email: universitypresident@minsu.edu.ph Website: www.minsu.edu.ph

Mobile: +63 977 846 72 28



#### REQUEST FOR QUOTATION

SUPPLY AND DELIVERY OF SEMI-EXPENDABLE MEDICAL EQUIPMENT FOR THE UNIVERSITY CLINIC AT MINSU MAIN CAMPUS

PR No.: PR25-0030 RFQ No. 2025-032

ABC Amount: Php53,200.00

: CPA Pharmacy Company Name 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 in the address stated in the last page. delivery and submit your quotation duly signed by your representative not later than \_

CIEDELLE PIOL-SALAZAR, J.D., Ph.D.

**BAC Chairperson** 

Note:

All entries must be typewritten.
 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
110.		95001 Ophthalmoscope/Otoscope Welch Allyn		10,000,00	19.000.00
1	unit	Pocket Junior Set with soft case	1	19,000.00	19,000.00
		767 Desk Type Welch Allyn Aneroid 7670-16 BP	1	32,000.00	32,000.00
2	unit	Apparatus		////	
	xvxvxvxvxv ne Thousan	TAPPON ACCOUNT OF THE PROPERTY	TOTAL	AVA	51,000.00

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

Supplier's Signature over Printed Name

TIN No. of Establishment 09176562195 Contact Number

March 10, 2025

Date

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
  - 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 of the basis of the following criteria:

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

#### 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.
- 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 <u>27-Jan-2005</u> 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 <u>01-Jun-2025</u>

Issued this <u>27th</u> day of <u>May 2024</u>. This is a system generated certificate. No signature is required.



#### REMINDERS 1

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

Certificate Reference No: 200501-6243-40225844

# List of Eligibility Documents

#### of CPA PHARMACY

POBLACION 1,

Victoria , Oriental Mindoro , Region IV-B , Philippines

	DTI Certificate Number : 2209456
	Issued By / Signatory: RAMON M. LOPEZ
DTI Certificate	Registration Date: 01-Oct-2020
	Expiration Date: 01-Oct-2025
	Expiration Date: 31-Dec-2024
	Permit Number: 888 0345
<b>Mayors Permit</b>	Place of Issue: VICTORIA ORIENTAL MINDORO
	Issued By / Signatory : JOSELITO C. MALABANAN
	Issuance Date: 10-Jan-2024
	Expiration Date: 01-Mar-2025
	TCC Number: RR9A-063-02-29-R0407-2024-E
Tax Clearance	Issued By / Signatory : AMIHAN L. VALDEZ
	Issuance date: 29-Feb-2024
	Date of Filing: 10-Apr-2024
	Current Asset: 2,618,117.50
Audited Financial Statement	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
	Expiration Date: -
	Issued By / Signatory:
PCAB License	Issuance Date : -
and the second s	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	Permit Number	Date of Issuance:	Date of Expiration:
Renew	888-0156	06 Jan 2025 A	December 31, 2025
O.R. Number	O.R. Date:	Amount Paid:	Capital Gross Sales:
4334381	1/06/2025	32,730.00	4,200,000.00

Taxpayer's Name:

MATANGUIHAN, YOLANDA

Business Name:

CPA PHARMACY

Nature of Business:

GRUGSTON, MEDICAL AND DENTAL SUPPLIES AND EDISPASENT (WHOLESALFRYSFTALLES)

OFFICE COUPMENT MACHINERY AND ELECTRONIC EQUIPMENT

Address

OLD MARKET, POBLACION I, Victoria, Oriental Mindoro

PERMIT SHALL BE SUBJECT TO IMMEDIATE GANCELLATION IF THERE IS FAILURE ON PARTIOF THE GRANTEE TO CONTINUOUSLY COMPLY WITH THE PROVISION OF THE BUILDING CODE OF THE PHILIPPINES AND OTHER PERTINENT LAWSTAND REGULATION BELATIVE TO SSUANCE OF PERMIT AND LICENSE

Approved by:

By the Authority of the May of

JOSELITO C. MALABANAN

onis Franchise Permittent) (Micial Recapt and be displayed er posted to subject to provide a conspicuous piace within the place of business of under along

CHARGE CONTROL OF THE CONTROL OF THE

#### **Omnibus Sworn Statement**

Republic of the Philippines) )SS Province of Or. Mindoro 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 Semi-Expendable Medical Equipment For the University Clinic at MinSU Main Campus;
- 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;
- 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;
- CPA PHARMACY is authorizing the Head of the Procuring Entity or its duly authorized representative to verify all the documents
- 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
- 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;
  - 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 Semi-Expendable Medical Equipment For the University Clinic 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 10th day of March, 2025 at Victoria Oriental Mindoro, Philippines.

YOLANDA'D. MATANGUIHAN Affiant

#### **ACKNOWLEDGEMENT**

SUBSCRIBE AND SWORN to before me this 10th day of March, 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 5, 2025 at Victoria, Oriental Mindoro, Philippines.

Witness my hand and seal this 10th day of March, 2025.

Doc. No. 42 Page No. 10

Book No. \*XIII;

Series of 2025

NOTARY PUBLIC

ın Victoria, Oriental Mindoro valid Until 12/31/26 Roll of Attorneys No. 80463 IBP No. 480405, 12/03/24 PTR No. 4333011A, 01/02/25

MGLF Compliance No. VIII-0007674 valid until 04/14/28

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#### **Omnibus Sworn Statement**

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

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- 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 Semi-Expendable Medical Equipment For the University Clinic 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.

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Page No. 10; Book No. 411; Series of 2025 NOTARY PUBLIC in Victoria, Oriental Mindoro valid Until 12/31/26 Roll of Attorneys No. 80463 IBP No. 480405, 12/03/24 PTR No. 4333011A, 01/02/25

MGLE Compliance No. VIII-0007674 valid until 04/14/28

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- Marie Trans

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 ONUL 1 8 2022

#### CERTIFICATE OF REGISTRATION

TIN & BRANCH CODE
129-326-144-00000
REGISTERING OFFICE

X Head Office

TIN ISSUANCE DATE
October 1, 2007

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

BIR FORM

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 L 1 8 2022

> > January 15 of the succeeding

#### 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	REVENUE BUSINESS OF NETWINS, REVENUE BUSINESS OF RETURNS, REV REVENUE BUSINESS OF RETERMS, REVENUE BURINGS OF RETURNS, REV REVENUE BUSINESS OF RETERMS, REVENUE BUSINESS OF RETURNS OF
REGISTERED ADDRESS	ORIENTAL MINDORO PHILIPPINES	REVENUE BUREAU OF STERNAL REVENUE BUREAU OF STERNAR REV REVENUE BUREAU OF STERNAL REVENUE BUREAU OF STERNAR REV REVENUE BUREAU OF STERNAL SEVENUE BUREAU OF STERNAL REV REVENUE BUREAU OF STERNAL SEVENUE BURLAU OF STERNAL REV

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TRADE NAME 1	CPA PHARMACY	REVENUE GUINEAU OF INTERNAL REVE SECURIOS STATEAU OF INTERNAL REVE	October 1, 2007
(PSIC) Line of Business	46594-WHOLESALE OF PROFESSIONAL AND SCIENTIFIC AND MEASURING AND CONTROLLING EQUIPMENT WHOLESALE OF PROFESSIONAL AND	Secondary	MANUEL BARRIAN OF PRETENDAN SERVICIONE BERNELO OF INCTINA AND SERVICIONES DE SERV
PRITEMAL REVENUE BURRAU OF INTERNAL PINTERNAL REVENUE BURRAU OF INTERNAL PINTERNAL REVENUE BURRAU OF INTERNAL PINTERNAL REVENUE BURRAU OF INTERNAL	SCIENTIFIC AND MEASURING AND CONTROLLING EQUIPMENT	REVENUE OUREAU OF INTERNAL HEVE REVENUE BURGAL OF INTERNAL HEVE REVENUE BURGAL OF INTERNAL HEVE	NUE BURGAU OF WYERRAL REVENUE BURGAU OF WYER BURGAU OF BYERRAL PEVENUE BURGAU OF WYER BURGAU OF BYERRAL REVENUE BURGAU OF WYER BURGAU OF BYERRAL REVENUE BURGAU OF WYER
(PSIC)	47722-RETAIL SALE OF MEDICAL, SURGICAL AND ORTHOPEDIC GOODS/INSTRUMENTS AND DENTAL SUPPLIES	Primary	AND INSTALL OF NYTERAN, ROYSELD BLANKA, ROYSELD BL
Line of Business	RETAIL SALE OF MEDICAL, SURGICAL AND ORTHOPEDIC GOODS/INSTRUMENTS AND DENTAL SUPPLIES	MENTENER MERKEN GE FOTERNAR FREN FOTERNER BERKEN GE FOTERNAR FRE FOTERNER BERKEN GE FOTERNAR FRE	THE DIMERAL OF STREETS, PARVISING BUSINESS OF STREETS AND AUTOMATICAL OF STREETS, REVORANT STREETS OF STREETS AND AUTOMATICAL OF STREETS, REVORANT BUSINESS
(PSIC)	47720-RETAIL SALE OF PHARMACEUTICAL AND MEDICAL GOODS, COSMETIC AND TOILET ARTICLES IN SPECIALIZED STORES	Secondary	MIT BUTTEAU OF METERIAL REVINEU BUTTEAU OF WITH  BUTTEAU OF METERIAL REVINEUR BUTTEAU OR WITH  BUTTEAU OF METERIAL REVINEUR BUTTEAU OF METERIAL
Line of Business	RETAIL SALE OF OTHER GOODS IN SPECIALIZED STORES	REVENUE BUREAU OF INTERNAL REV A REVENUE BUREAU OF INTERNAL REV A REVENUE BUREAU OF INTERNAL REV	NT NUE BUREAU OF NYESSAL REVERUE BLASEAU OF NYE- VYNUE BUREAU OF STERMAL REVERUE BLASEAU OF NYE- VYN NUE BUREAU OF NYESSAL REVERUE BLASEAU OF NYE- NE BUREAU OF NYESSAL REVERUE BLASEAU OF NYE
(PSIC)	46429-WHOLESALE OF MISCELLANEOUS CONSUMER GOODS, N.E.C.	Secondary	OR BUILD DATERAN OF INTERNAL REVENUE BASERAL DE NOTA OR BUILD BASERAL OF ORTERNAL STATUS (MILES AND OF NOTA THE STATE BASERAL OF ORTERNAL STATUS (MILES AND OF NOTA THE STATE OF THE STATUS (MILES AND OF NOTA THE STATE OF THE STATE OF THE STATE OF THE STATE OF NOTA A DATE OF THE STATE OF THE STATE OF THE STATE OF NOTA THE STATE OF THE ST
Line of Business (PSIC)	WHOLESALE OF HOUSEHOLD GOODS  47739-OTHER RETAIL SALE OF NEW GOODS IN SPECIALIZED STORES, N.E.	A REVENUE BUREAU OF INTERNAL NE A REVENUE BUREAU OF INTERNAL NE X REVENUE BUREAU OF INTERNAL NE A REVENUE BUREAU OF INTERNAL NE A REVENUE BUREAU OF INTERNAL NE A REVENUE BUREAU OF INTERNAL NE	NAME AND ADDRESS OF STREET, REVENUE, BUREAU OF STREET, NAME AND ADDRESS OF STREET, REVENUE, BUREAU OF STREET, NAME AND ADDRESS OF STREET, REVENUE, BUREAU OF STREET, BUREAU OF
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Line of Business	RETAIL SALE OF OTHER GOODS IN SPECIALIZED STORES	AL FREYENDE BUREAU OF INTERNAL RE LA REYENDE BUREAU OF INTERNAL RE LA REYENGE BUREAU OF INTERNAL RE LA REYENGE BUREAU DE INTERNAL RE LA REYENGE BUREAU DE INTERNAL RE	POLYMON DUMBALO OF BYTESOGAL DEVERAGE BURBALO OF BYTESOGAL BURBALO DEVERAGE BURBALO DEVERAGE BURBALO DEVERAGE BURBALO DEVERAGE BURBALO DEVERAGE BURBALO DE BYTESOGAL BURBALO DE BYTE

#### 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.
- Filing of required tax return/s to conform with the above tax types, whether with or without business

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 ONL 18 2022

#### CERTIFICATE OF REGISTRATION

TIN & BRANCH CODE NAME OF TAXPAYER

129-326-144-00000 MATANGUIHAN, YOLANDA DIMAANO October 1, 2007

REGISTERING OFFICE X Head Office Branch

REGISTERED ADDRESS

POBLACION I 5205 VICTORIA ORIENTAL MINDORO PHILIPPINES

operation, to avoid penalties.

3. 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.

4. Immediately inform the district office in case of transfer/cessation of business and other changes in

registration information by filing BIR Form No. 1905.

5. 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

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.



#### Bureau of Internal Revenue Republic of the Philippines



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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** 

: 4,619.40

(Over Remittance)

**Accounting Type** 

: C - Calendar

For Tax Period

: 09/30/2024

**Date Filed** 

: 11/07/2024

Tax Type

: IT

Proceed to Payment

BIR Main | eFPS Login | User Menu | Help ]



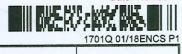
## BIR eFPS has received the payment confirmation for your tax return from SBTC.

TIN	129 - 326 - 144 - 000
Taxpayer's Name	MATANGUIHAN, YOLANDA DIMAANO
Тах Туре	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

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Guidelines and Instructions | Help Reference No:422400062533365 Date Filed:November 07 2024 10:23 AM Batch Number:0



For BIR Use BCS/ Only Item

	Republika ng Pili Kagawaran ng Pa Kawanihan ng Re Internas	inanalap	oi	Quarterly Income Tax Return For Individuals, Estates and Trusts Enter all required information in CAPITAL LETTERS using BLACK ink. Mark applicable boxes with an "X". Two copies MUST be filed with the BIR and one held by the Tax Filer.				1	BIR Form No.  1701Q  January 2018 (ENCS)  Page 1	
1 For the	Year		2 Quarter		3 Amended R	eturn?	4 Number	of Sheet/s Att	ached	
(YYYY)	2024		O 1st C	2nd  3rd	O Yes @	No	0			
			Part	I - Background In	nformation on	Taxpayer/Filer				
5 Taxpaye	er Identification Number	129		- 326	- 144	- 000	6	RDO Code	063	
	er/Filer Type	( s	ingle Propriet	or Professional	Estate T	rust				
8 Alphani Tax Code					II013 Mixed me-Graduated IT s	II015 Busine Income–8% IT Ra			II016 Mixed ome–8% IT e	
9 Тахрау	er/Filer's Name (Last Name	, First Nam	e, Middle Name fo	Individual) / ESTATE of (First )	Name, Middle Name, Las	t Name) / TRUST FAO: (i	First Name, Middle Name	e, Last Name)		
MATANG	BUIHAN, YOLANDA DI	MAANC	)							
	tered Address (Indicate con	nplete regis	stered address. If b	ranch, indicate the branch addr	ess. If the registered add	ress is different from the	current address, go to the	RDO to update n	egistered address by	
using BIR F	C MARKET OR, MINDO	ORO								
							10A ZIP Code	5205		
11 Date	of Birth (MM/DD/YYYY)		12 Email Add	ress						
			an_cpa@yahoo.com							
13 Citizenship			14 Foreign Tax Number (if applicable) 15 Claiming Foreign Tax Cred			gn Tax Credits	?			
FILIPINO			Yes No							
	00.0\7			available if gross sales  Optional Standard Ded						
(e) Iter	mized Deduction [Sec.	34(A-J)		- Background Info						
47.0		129		- 326	- 144	- 000		8 RDO Code		
17 Spou	se's TIN	129			pers.			TO REG GOOD		
19 Filer's	Spouse Type		Single	Proprietor Profession	onal Compens	ation Earner				
<b>20</b> ATC	II012 Business Income–Graduated I <sup>*</sup> Rates				II011 ed Compensation	Business Income–8% Rate	from Profes		II016 Mixed ncome-8% IT tate	
21 Spou	ise's Name (Last Name, I	First Nan	ne, Middle Nam	e)						
22 Citize	enship			23 Foreign Tax Nun	nber, if applicable		24 Claiming Forei	gn Tax Credits	?	
				1			O Yes O N	lo		
25 Tax F (choose of for income from busing profession	one, he 8% on an iness/ Sec. 116 of the	oss sale	es/receipts & c	e – page 2 Choose Met ther non-operating inco available if gross sales	ome in lieu of Grad	duated Rates unde	er Sec. 24(A)(2)(a) come do not excee	& Percentaged Three Milli	e Tax under on Pesos (P	
	ethod of Deduction mized Deduction [Sec.	34(A-1)	NIRCI O	Optional Standard Ded	luction (OSD) [409	% of Gross Sales/F	Receipts/Revenues	s/Fees [Sec. 3	34(L), NIRC]]	

		Part III - Total Tax Payable	(DO NOT enter Centavos; 49 Centavos o	or Less drop down; 50 or more rou
	Particulars		A) Taxpayer/Filer	B) Spouse
26 Tax Due (From Part V, Scho	edule I-Item 46 OR Schedule II-I	tem 54)	49,687	
27 Less: Tax Credits/Payments	(From Part V, Schedule III-Item	<u>62)</u>	45,068	
28 Tax Payable/(Overpayment)	(Item 26 Less Item 27) (From Part	V, Item 63)	4,619	
29 Add: Total Penalties (From I	Part V, Schedule IV-Item 67)		0	
30 Total Amount Payable/(Over	payment) Sum of Items 28 and 29 (	From Part V, Item 68)	4,619	
31 Aggregate Amount Payable/	(Overpayment) (Sum of Item 30A ar	nd 30B)		4,619
		ed Name of Taxpayer/Authorized Rep (Indicate Title/Designation and TIN) Part IV - Details of Paymer	)	
Particulars  2 Cash/Bank Debit Memo	Drawee Bank/Agency	Number	Date(MM/DD/YYYY)	Amount
3 Check				
4 Tax Debit Memo				
5 Others (specify below)				
Attachments	ial Receipt Details (if not filed with a	in Authorized Agent Banky		e/AAB and Date of Receipt Bank Teller's Initial)  Add Attachment
				Remove Attachment
	Prev	Page: 01 v of 2	Next	

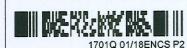
[ BIR Main | Tax Return Inquiry | User Menu | Guidelines and Instructions | Help ]



Guidelines and Instructions | Help Reference No:422400062533365 Date Filed:November 07 2024 10:23 AM Batch Number:0

BIR Form No. 1701Q

## Quarterly Income Tax Return For Individuals, Estates and Trusts



Pag						
'IN	000	1 1	000	Taxpayer/Filer's Last Name  MATANGUIHAN, YOLANDA DIMAANO		
129	- 326	- 144	- 000			
					A) Taxpayer/Filer	B) Spouse
lf aradu	sated rate fill	in items 36 to	Declaration this 46; if 8%, fill in item		A) Taxpayer/Filet	B) Spouse
	- For Graduate		10, 11 070, 1111 III II.			
36 Sales/R	Revenues/Rece	ipts/Fees (net of	sales returns, allowan	nces and discounts)	857,830	
<b>37</b> Less: C	ost of Sales/Se	rvices (applicab	le only if availing Ite	mized Deductions)	669,492	
38 Gross Ir	ncome/(Loss) f	rom Operation (It	em 36 Less Item 37)		188,338	
Less: Al	llowable Deduc	tions				
39 Tota	al Allowable Ite	mized Deduction	S		122,166	WAN THE PROPERTY OF THE PROPER
	OR					
			) (40% of Item 36)		0	
41 Net Inco	ome/(Loss) Thi	s Quarter(If Itemi	zed: Item 38 Less Iter	m 39; If OSD: Item 38 Less Item 40)	66,172	
Add: 42	2 Taxable Incor	me/(Loss) Previo	us Quarter/s		469,765	
4:	3 Non-Operation	ng Income (speci	fy)		0	
9						
					Add Delete	Upload Attachmer
44	4 Amount Rece	eived/Shared in Ir	ncome by a Partner fro	om General Professional Partnership (GPP)	0	
			10 5 Hama 11 to	14)	535,937	
45 Total Ta	axable income	e/(Loss) To Date	(Sum of Items 41 to 4	14)		
				e below) ( <u>To Part III, Item 26)</u>	49,687	
46 TAX DL		Applicable Tax Ra				
46 TAX DL	JE (Item 45 × A	A <i>pplicable Tax Ra</i> Rate		e below) ( <u>To Part III, Item 26)</u>		
46 TAX DL chedule II 47 Sales/R	JE (Item 45 × A - For 8% IT R Revenues/Rece	Applicable Tax Ra Rate hipts/Fees (net of	ite based on Tax Table	e below) ( <u>To Part III, Item 26)</u>	49,687	
46 TAX DL chedule II 47 Sales/R 48 Add: N	JE (Item 45 × A - For 8% IT R Revenues/Rece	A <i>pplicable Tax Ra</i> Rate	ite based on Tax Table	e below) ( <u>To Part III, Item 26)</u>	49,687	
46 TAX DL chedule II 47 Sales/R	JE (Item 45 × A - For 8% IT R Revenues/Rece	Applicable Tax Ra Rate hipts/Fees (net of	ite based on Tax Table	e below) ( <u>To Part III, Item 26)</u>	0 0	
46 TAX DL chedule II 47 Sales/R 48 Add: N	JE (Item 45 × A - For 8% IT R Revenues/Rece	Applicable Tax Ra Rate hipts/Fees (net of	ite based on Tax Table	e below) ( <u>To Part III, Item 26)</u>	0 0	Upload Attachme
46 TAX DUCChedule II 47 Sales/R 48 Add: N	JE (Item 45 × A  - For 8% IT R  Revenues/Rece	Applicable Tax Ra Rate hipts/Fees (net of	te based on Tax Table sales returns, allowar	e below) ( <u>To Part III, Item 26)</u>	0 0	Upload Attachme
46 TAX DL schedule II 47 Sales/R 48 Add: N	JE (Item 45 × A  - For 8% IT R Revenues/Rece Ion-Operating In	Applicable Tax Ra Rate elipts/Fees (net of ncome (specify)  uarter (Sum of Ite	te based on Tax Table sales returns, allowar	e below) ( <u>To Part III, Item 26)</u> nces and discounts)	49,687 0 0 Add Delete	Upload Attachme
46 TAX DL chedule II 47 Sales/R 48 Add: N 49 Total In 50 Add: To	JE (Item 45 × A  - For 8% IT R  Revenues/Rece Ion-Operating In  Income for the quantity of the Income Incom	Applicable Tax Ra Rate  Papel (specify)  Applicable Tax Ra Rate  R	sales returns, allowar	e below) ( <u>To Part III, Item 26)</u> nces and discounts)  of previous quarter)	49,687 0 0 Add Delete	Upload Attachme
46 TAX DL chedule II 47 Sales/R 48 Add: N 49 Total In 50 Add: To 51 Cumula	JE (Item 45 × A  - For 8% IT R  Revenues/Rece  Ion-Operating In  Income for the quantity  Interpretation of the potential Taxable Incometive	Applicable Tax Ra Rate  Pelpts/Fees (net of ncome (specify))  uarter (Sum of Ite come/(Loss) Previocome/(Loss) as oftion from gross s	sales returns, allowar ems 47 and 48) ious Quarter (Item 51 of This Quarter (Sum alles/receipts and othe	e below) ( <u>To Part III, Item 26)</u> nces and discounts)  of previous quarter)	49,687  0  0  Add Delete  0  0	Upload Attachmen
46 TAX DL schedule II 47 Sales/R 48 Add: N 49 Total In 50 Add: To 51 Cumula 52 Less: A	For 8% IT Revenues/Receion-Operating Income for the quotal Taxable Incative Taxable Income/or profession	Applicable Tax Ra Rate  Papplicable Tax Ra Rate  Papplicable Tax Ra Rate  Papplicable Tax Ra  Rate  Papplicable Tax Rate	sales returns, allowar sales returns, allowar ems 47 and 48) ious Quarter (Item 51 of This Quarter (Sum of P 250,000	e below) (To Part III, Item 26)  nces and discounts)  of previous quarter) of Items 49 and 50)	49,687  0  Add Delete  0  0  0	Upload Attachmet
46 TAX DL chedule II 47 Sales/R 48 Add: N 49 Total In 50 Add: To 51 Cumula 52 Less: A dividuals ar 53 Taxable	JE (Item 45 × A  - For 8% IT R Revenues/Rece Ion-Operating In accome for the quantity total Taxable Inc ative Taxable Inc ative Taxable reduce Indoor profession Income/(Los	Applicable Tax Ra Rate  Pelpts/Fees (net of neome (specify)  uarter (Sum of Ite come/(Loss) Previacome/(Loss) as oftion from gross sinals in the amounts) To Date (Item	sales returns, allowar sales returns, allowar ems 47 and 48) ious Quarter (Item 51 of This Quarter (Sum ales/receipts and other tof ₱ 250,000	e below) (To Part III, Item 26)  nces and discounts)  of previous quarter) of Items 49 and 50)	Add Delete  Add Delete  0 0 0 0 0 0 0 0 0 0 0 0	Upload Attachmen
46 TAX DL chedule II 47 Sales/R 48 Add: N 49 Total In 50 Add: To 51 Cumula 52 Less: A dividuals ar 53 Taxable 54 TAX DL	JE (Item 45 × A  - For 8% IT R Revenues/Rece Ion-Operating In Income for the quitotal Taxable Incometive Taxable Incomed/Ior profession Income/Icos In	Applicable Tax Rate  Rate  Eipts/Fees (net of or	sales returns, allowar sales returns, allowar ems 47 and 48) ious Quarter (Item 51 of This Quarter (Sum of P 250,000	e below) (To Part III, Item 26)  nces and discounts)  of previous quarter) of Items 49 and 50)	Add Delete	Upload Attachme
46 TAX DL ichedule II 47 Sales/R 48 Add: N 49 Total In 50 Add: To 51 Cumula 52 Less: A individuals ar 53 Taxable 54 TAX DL	For 8% IT Revenues/Recellon-Operating In the process of the quantum translet Income for the quality of the Taxable Income for the quality of Taxable Income/Quality of the profession of the profession of the process o	Applicable Tax Ra Rate  Pelipts/Fees (net of neome (specify))  Luarter (Sum of Ite come/(Loss) Previous former gross so nais in the amount (ss) To Date (Item 18% Tax Rate) (To	sales returns, allowar sales returns, allowar ems 47 and 48) ious Quarter (Item 51 of This Quarter (Sum ales/receipts and other tof ₱ 250,000	e below) (To Part III, Item 26)  nces and discounts)  of previous quarter) of Items 49 and 50)	49,687  0  0  Add Delete  0  0  0  0  0  0  0	Upload Attachme
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46 TAX DL chedule II 47 Sales/R 48 Add: N 49 Total In 50 Add: To 51 Cumula 52 Less: A dividuals ar 53 Taxable 54 TAX DL chedule III 55 Prior Ye 56 Tax Pay 57 Credita	For 8% IT Revenues/Receion-Operating In the protection of the quantities of the quantities of the protection of the quantities of the quan	Applicable Tax Ra Rate  Pelpts/Fees (net of of oncome (specify))  Luarter (Sum of Ite Come/(Loss) Previous (Loss) as oncome/(Loss) as oncome/(Loss) as oncome/(Loss). To Date (Item and Tax Rate) (To oncome/(Loss) Payments  Redits  Previous Quartered of the Previous (Loss) Previous (Loss).	sales returns, allowar sales returns, allowar ems 47 and 48) ious Quarter (Item 51 of This Quarter (Sum o ales/receipts and othe nt of ₱ 250,000 51 Less Item 52) part III, Item 26)	e below) (To Part III, Item 26)  nces and discounts)  of previous quarter)  of Items 49 and 50)  er non-operating income of purely self-employed	49,687  O  Add Delete  O  O  O  O  O  O  O  O  O  O  O  O  O	Upload Attachme
46 TAX DL chedule II 47 Sales/R 48 Add: N 49 Total In 50 Add: To 51 Cumula 52 Less: A dividuals ar 53 Taxable 54 TAX DL chedule III 55 Prior Ye 56 Tax Pay 57 Credita 58 Credita	JE (Item 45 × A  - For 8% IT R Revenues/Rece Ion-Operating In Income for the que Income for the que Income for the que Income for the que Income/Los I = Tax Credits I = Tax Credits I = Tax Credits I = Tax Withhe Income Ion Income Ion	Applicable Tax Ra Rate  Pelpts/Fees (net of of opening of the come (specify))  uarter (Sum of Ite opening open	sales returns, allowar sales returns, allowar ems 47 and 48) ious Quarter (Item 51 of This Quarter (Sum of P 250,000 51 Less Item 52) Part III, Item 26) r/s is Quarter/s No. 2307 for this Qua	e below) (To Part III, Item 26)  nces and discounts)  of previous quarter) of Items 49 and 50) er non-operating income of purely self-employed	49,687  O  Add Delete  O  O  O  O  O  O  O  O  O  10,614  22,789  11,665	Upload Attachmen
46 TAX DL chedule II 47 Sales/R 48 Add: N 49 Total In 50 Add: To 51 Cumula 52 Less: A dividuals ar 53 Taxable 54 TAX DL chedule III 55 Prior Ye 56 Tax Pay 57 Credita 58 Credita	JE (Item 45 × A  - For 8% IT R Revenues/Rece Ion-Operating In Income for the que Income for the que Income for the que Income for the que Income/Los I = Tax Credits I = Tax Credits I = Tax Credits I = Tax Withhe Income Ion Income Ion	Applicable Tax Ra Rate  Pelpts/Fees (net of of opening of the come (specify))  uarter (Sum of Ite opening open	sales returns, allowar sales returns, allowar ems 47 and 48) ious Quarter (Item 51 of This Quarter (Sum o ales/receipts and othe nt of ₱ 250,000 51 Less Item 52) part III, Item 26)	e below) (To Part III, Item 26)  nces and discounts)  of previous quarter) of Items 49 and 50) er non-operating income of purely self-employed	49,687  Add Delete  0 0 0 0 0 0 0 10,614 22,789 11,665	Upload Attachme
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46 TAX DL chedule II 47 Sales/R 48 Add: N 49 Total In 50 Add: To 51 Cumula 52 Less: A dividuals ar 53 Taxable 54 TAX DL 6chedule III 55 Prior Ye 56 Tax Pa 57 Credita 58 Credita 59 Tax Pai 60 Foreign	JE (Item 45 × A  - For 8% IT R Revenues/Rece Ion-Operating In Income for the quitotal Taxable Incometative Incometative Taxable Incometative Inc	Applicable Tax Ra Rate  Pelpts/Fees (net of of oncome (specify))  Luarter (Sum of Ite  Come/(Loss) Previous of oncome/(Loss) as one of oncome/(Loss) a	sales returns, allowar sales returns, allowar ems 47 and 48) ious Quarter (Item 51 of This Quarter (Sum of P 250,000 51 Less Item 52) Part III, Item 26) r/s is Quarter/s No. 2307 for this Qua	e below) (To Part III, Item 26)  nces and discounts)  of previous quarter) of Items 49 and 50) er non-operating income of purely self-employed	49,687  Add Delete  0 0 0 0 0 0 0 10,614 22,789 11,665	Upload Attachme

62 Total Tax Credits/Payments (Sum o	45,068	0							
63 Tax Payable/(Overpayment) (Item	4,619	0							
Schedule IV – Penalties									
64 Surcharge	0	0							
65 Interest	O	0							
66 Compromise	0	0							
67 Total Penalties (Sum of Items 64 to	0	0							
68 Total Amount Payable/(Overpay	4,619	0							
TABLE 1 – Tax Rates (effective Jar	uary 1, 2018 to December 31, 2022	tABLE 2 – Tax	Rates (effective	January 1, 2023 and	onwards)				
If Taxable Income is:	Tax Due is:	lf Ta	xable Income is:		Tax Due is:				
Not over <b>P</b> 250,000	0%	Not over #250,000		0%	0%				
Over \$250,000 but not over \$400,000	20% of the excess over \$250,000	Over \$250,000 but	not over P400,000	15% of the excess	over ₱250,000				
Over P400,000 but not over P800,000	P30,000 + 25% of the excess over P400,00	00 Over <b>P</b> 400,000 but	not over \$800,000	P22,500 + 20% of	6 of the excess over P400,000				
Over \$800,000 but not over \$2,000,000	P130,000 + 30% of the excess over P800,0	000 Over ₱800,000 but	not over \$2,000,000	P102,500 + 25% o	25% of the excess over \$\mathbb{P}800,000				
Over ₱2,000,000 but not over ₱8,000,000	P490,000 + 32% of the excess over P2,000	0,000 Over <b>P</b> 2,000,000 bi	ut not over \$8,000,000	P402,500 + 30% o	f the excess over P2,000,000				
Over <b>P</b> 8,000,000	₱2,410,000 + 35% of the excess over ₱8,0	000,000 Over <b>9</b> 8,000,000		P2,202,500 + 35%	of the excess over \$8,000,000				
Attachments					dd Attachment nove Attachment				
	Prev	age: 02 v of 2		Next					
	Print F	Payment Details	Proceed to	Payment					

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#### Bureau of Internal Revenue Republic of the Philippines

Issuances | FAQs | Job Aids | BTR Main | Covationes | Logout



# 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

Proceed to Payment

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

TIN	129 - 326 - 144 - 000
Taxpayer's Name	MATANGUIHAN, YOLANDA DIMAANO
Гах Туре	VT
Return Period	12/31/2024
Fransacting Bank	SBTC (027000)
Reference Number	102500063654092
Payment Transaction Number	256224257
Payment Transaction Date	01/18/2025
Actual Amount Paid	3461.10
BTC's Confirmation Number	BI-011825-90041

Please refer to the Tax Return Inquiry facility to check the status of your payment.

[ eFPS Main | BIR Main | Help | Print ]



Guidelines and Instructions | Help Reference No:102500063654092 Date Filed:January 18, 2025 10:30 AM Batch Number:2506398389

DES.

PSIC: 5138 Bir Form No. Republika ng Pilipinas **Quarterly Value-Added** 2550-Kagawaran ng Pananalapi Kawanihan ng Rentas Internas February 2007 (ENCS) Tax Return (Cumulative For 3 Months) From 4 Amended 5 Short For the 3 Return Period Return? 2 Quarter Period Year (MM/DD/YYYY) To Calendar Fiscal 10/01/2024 Return? (0) Ended (MM/ Yes No Yes No 12/31/2024 YYYY) 1st 2nd 3rd 4th December v 2024 8 No. of Line of 7 RDO WHOLESALE OF MISCELLANEOUS 0 144 000 063 6 129 326 sheets TIN Business Code attached Taxpayer's Name (For Individual) Last Name, First Name, Middle Name/ (For Non-individual) Registered Name 11 Telephone Number MATANGUIHAN, YOLANDA DIMAANO 13 Zip Code Registered Address 5205 PUBLIC MARKET OR. MINDORO Are you availing of tax relief If yes, please specify 14under Special Law or International Tax Yes No Treaty? Computation of Tax PART II Sales/Receipts for the Quarter (Exclusive of VAT) Output Tax Due for the Quarter 15B 0.00 0.00 15 Vatable Sales/Receipt - Private (see Sch. 1) 176,387.59 1,469,896.62 16B 16A 16 Sale to Government 116,950.00 17 17 Zero Rated Sales/Receipts 0.00 18 18 Exempt Sales/Receipts 1.586.846.62 19B 176,387.59 19A 19 Total Sales/Receipts and Output Tax Due 20 Less: Allowable Input Tax 0.00 20A Input Tax Carried Over from Previous Period 20A 0.00 20B Input Tax Deferred on Capital Goods Exceeding P1Million from Previous Quarter 20B 0.00 20C Transitional Input Tax 20C 0.00 20D Presumptive Input Tax 20D 20E 0.00 20E 20F 0.00 Total (Sum of Item 20A, 20B, 20C, 20D & 20E) 20F Purchases 21 Current Transactions Purchase of Capital Goods not exceeding P1Million (see 0.00 0.00 21B 21A 21A/B Sch. 2) 21C/D Purchase of Capital Goods exceeding P1Million (see Sch. 321C 0.00 0.00 21D 90.131.56 21F 751,096.37 21E 21E/F Domestic Purchases of Goods Other than Capital Goods 0.00 0.00 21H 21G/H Importation of Goods Other than Capital Goods 21G 4,079.14 211 33,992.86 21J 211/J Domestic Purchase of Services 0.00 0.00 21L 21K 21K/L Services Rendered by Non-residents 54,876.59 21M Purchases Not Qualified for Input Tax 21M 0.00 0.00 210 21N/O Others Total Current Purchases (Sum of Item 21A, 21C, 21E, 21G, 21P 839,965.82 21I, 21K, 21M & 21N) 94,210.70 22 22 Total Available Input Tax (Sum of Item 20F, 21B, 21D, 21F, 21H, 21J, 21L & 21O) 23 Less: Deductions from Input Tax Input Tax on Purchases of Capital Goods exceeding P1Million deferred for the succeeding period (see 0.00 23A 23A Sch. 3) 0.00 23B Input Tax on Sale to Gov't. closed to expense (see Sch. 4) 23B

23C	Input Tax allocable	e to Exempt Sale	s (see Sch. 5)				23C	0.00	
23D							23D	0.00	
23E	Others			23E					
23F	Total (Sum of Item	n 23A, 23B, 23C,		23F	0.00				
Total Allo	wable Input Tax (Ite	em 22 less Item 2	23F)				24	94,210.70	
Net VAT F	Payable (item 19B l	less Item 24)					25	82,176.89	
Less: Tax	Credits/Payments								
26A	Monthly VAT Payr	nents - previous	two months				26A	0.00	
26B	Creditable Value-	Added Tax Withh	eld (see Sch. 6	5)			26B	78,715.79	
26C	The state of the s	t for Sugar and F	lour Industries (	see Sch.			26C	0.00	
26D		Sales to Governm		26D	0.00				
26E		previously filed,		26E	0.00				
	Advance Payments			26F	0.00				
		,					26G	0.00	
			Item 26A, 26B,	26C,			26H	78,715.79	
			s Item 26H)				27	3,461.10	
Add: Pena	alties	Surcharge		Interest		Compromise			
	28A	0.00	28B	0.00	28C	0.00	28D	0.00	
Total Amo	ount Payable (Over	payment) (Sum o	of Item 27& 28D	)			29	3,461.10	
		payment) (Sum c	of Item 27& 28D	)			29 Add Attac		
							Remove Att	tachment	
							Attachmen		
	23D 23E 23F Total Allo Net VAT I Less: Tax 26A 26B 26C 26D 26E 26F 26G 26H Tax Still F Add: Pen	23D VAT Refund / TCC 23E Others 23F Total (Sum of Item Total Allowable Input Tax (Ite Net VAT Payable (item 198) Less: Tax Credits/Payments 26A Monthly VAT Payr 26B Creditable Value-/ 26C Advance Paymen 7) 26D VAT withheld on S VAT paid in return return 26F Advance Payments BIR Form No. 0605 26G Others Total Tax Credits/Pa 26D, 26E, 26F, & 2 Tax Still Payable/ (Overpaym Add: Penalties	23D VAT Refund / TCC claimed 23E Others 23F Total (Sum of Item 23A, 23B, 23C, Total Allowable Input Tax (Item 22 less Item 2 Net VAT Payable (item 19B less Item 24) Less: Tax Credits/Payments 26A Monthly VAT Payments - previous 26B Creditable Value-Added Tax Withh Advance Payment for Sugar and F 7) 26D VAT withheld on Sales to Governm VAT paid in return previously filed, return 26F Advance Payments made (please at BIR Form No. 0805) 26G Others 26H Total Tax Credits/Payments(Sum of 26D, 26E, 26F, & 26G) Tax Still Payable/ (Overpayment) (Item 25 les Add: Penalties Surcharge 28A 0.00 Total Amount Payable (Overpayment) (Sum of 28D, 26A)	23D VAT Refund / TCC claimed 23E Others 23F Total (Sum of Item 23A, 23B, 23C, 23D & 23E)  Total Allowable Input Tax (Item 22 less Item 23F)  Net VAT Payable (item 19B less Item 24)  Less: Tax Credits/Payments 26A Monthly VAT Payments - previous two months 26B Creditable Value-Added Tax Withheld (see Sch. 6 26C Advance Payment for Sugar and Flour Industries (7)  26D VAT withheld on Sales to Government (see Sch. 6 26E VAT paid in return previously filed, if this is an ame return 26F Advance Payments made (please attach proof of pa BIR Form No. 0605)  26G Others 26H Total Tax Credits/Payments(Sum of Item 26A, 26B, 26D, 26E, 26F, & 26G)  Tax Still Payable/ (Overpayment) (Item 25 less Item 26H)  Add: Penalties Surcharge  28A 0.00 28B  Total Amount Payable (Overpayment) (Sum of Item 27& 28D	23D VAT Refund / TCC claimed 23E Others 23F Total (Sum of Item 23A, 23B, 23C, 23D & 23E)  Total Allowable Input Tax (Item 22 less Item 23F)  Net VAT Payable (item 19B less Item 24)  Less: Tax Credits/Payments 26A Monthly VAT Payments - previous two months 26B Creditable Value-Added Tax Withheld (see Sch. 6) 26C Advance Payment for Sugar and Flour Industries (see Sch. 7)  26D VAT withheld on Sales to Government (see Sch. 8) 26E VAT paid in return previously filed, if this is an amended return 26F Advance Payments made (please attach proof of payments - BIR Form No. 0805)  26G Others 26H Total Tax Credits/Payments(Sum of Item 26A, 26B, 26C, 26D, 26E, 26F, & 26G)  Tax Still Payable/ (Overpayment) (Item 25 less Item 26H)  Add: Penalties Surcharge Interest  28A 0.00 28B 0.00	Others  Total (Sum of Item 23A, 23B, 23C, 23D & 23E)  Total Allowable Input Tax (Item 22 less Item 23F)  Net VAT Payable (item 19B less Item 24)  Less: Tax Credits/Payments  A Monthly VAT Payments - previous two months  Creditable Value-Added Tax Withheld (see Sch. 6)  Advance Payment for Sugar and Flour Industries (see Sch. 7)  Advance Payments made (please attach proof of payments - BIR Form No. 0605)  Chers  Total Tax Credits/Payments(Sum of Item 26A, 26B, 26C, 26D, 26E, 26F, & 26G)  Tax Still Payable/ (Overpayment) (Item 25 less Item 26H)  Add: Penalties Surcharge Interest  28A 0.00 28B 0.00 28C	Others  Total (Sum of Item 23A, 23B, 23C, 23D & 23E)  Total Allowable Input Tax (Item 22 less Item 23F)  Net VAT Payable (item 19B less Item 24)  Less: Tax Credits/Payments  26A Monthly VAT Payments - previous two months  26B Creditable Value-Added Tax Withheld (see Sch. 6)  Advance Payment for Sugar and Flour Industries (see Sch. 7)  26D VAT withheld on Sales to Government (see Sch. 8)  VAT paid in return previously filed, if this is an amended return  26F Advance Payments made (please attach proof of payments - BIR Form No. 0805)  26G Others  26H Total Tax Credits/Payments(Sum of Item 26A, 26B, 26C, 26D, 26E, 26F, & 26G)  Tax Still Payable/ (Overpayment) (Item 25 less Item 26H)  Add: Penalties Surcharge Interest Compromise  28A 0.00 28B 0.00 28C 0.00	23D VAT Refund / TCC claimed  23D 23E Others  23F Total (Sum of Item 23A, 23B, 23C, 23D & 23E)  23F Total (Sum of Item 23A, 23B, 23C, 23D & 23E)  23F Total Allowable Input Tax (Item 22 less Item 23F)  24 Net VAT Payable (item 19B less Item 24)  25 Less: Tax Credits/Payments  26A Monthly VAT Payments - previous two months  26B Creditable Value-Added Tax Withheld (see Sch. 6)  26C Advance Payment for Sugar and Flour Industries (see Sch. 7)  26D VAT withheld on Sales to Government (see Sch. 8)  26E VAT paid in return previously filed, if this is an amended return  26F BIR Form No. 0805)  26G Others  26G Others  26G Total Tax Credits/Payments(Sum of Item 26A, 26B, 26C, 26D, 26E, 26E, & 26G)  27 Total Tax Credits/Payments (Sum of Item 26A, 26B, 26C, 26D, 26E, 26E, & 26G)  27 Total Tax Credits/Payment) (Item 25 less Item 26H)  27 Add: Penalties Surcharge Interest Compromise  28A 0.00 28B 0.00 28C 0.00 28D Total Amount Payable (Overpayment) (Sum of Item 27& 28D)  28 Add Attac	

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# REPUBLIC OF THE PHILIPPINES DEPARTMENT OF FINANCE

#### **BUREAU OF INTERNAL REVENUE**

REVENUE REGION NO. 9A - CaBaMiRo

QF-TCC-01-01-2024.01

TCBP NO. RR9A-063-03-06-R0493-2025-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 6th day of March, 2025.

NOTE: THIS CERTIFICATE SHALL BE VALID AND EFFECTIVE FROM DATE OF ISSUE UNTIL MARCH 06, 2026 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 MARCH 02, 2025 UNDER EFPS PAYMENT TRANSACTION NO. 257314062. ANY ERASURE MADE ON THIS TCC SHALL RENDER IT NULL AND VOID.



ROSALINDA D. CABIDOG
Chief, Collection Division

DOCUMENTARY STAMP TAX DATE OF PAYMENT: 03/02/2025 PAYMENT CONFIRMATION: 257314120 AMOUNT: P30.00

WARNING: Counterfeiting is punishable by law. For authenticity, please visit BIR website <a href="https://www.bir.gov.ph/Tax-Clearance-List-Issued-TCC">https://www.bir.gov.ph/Tax-Clearance-List-Issued-TCC</a>. 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

ADIS- 12-4 Page 1 of 1

Standard Form Number: SF-GOOD-01 Revised on: May 24, 2004

# APPROVED BUDGET FOR THE CONTRACT (ABC) SUPPLY AND DELIVERY OF SEMI-EXPENDABLE MEDICAL EQUIPMENT FOR TEH UNIVERSITY CLINIC AT MINSU MAIN CAMPUS Alcate, Victoria, Oriental Mindoro

Project Name and Location

Stations: Mindoro State University

Length:									Contract Duration:	ration:		
				CURRENT MARKET		VAT. OTHER TAXES AND/OR	FREIGHT &	OTHER	OTHER COST FACTORS INFLATION, CURRRENCY	r FACTORS		
ITEM NO.	DESCRIPTION	QUANTITY	UNIT	PRICE	TOTAL COST	DUTIES APPLICABLE	INSURANCE	COSTS	%	VALUE	TOTAL COST	UNIT COST
					•				INFLATION, CURRRENCY	URRRENCY		
									%	VALUE		
										(11)	(12)	(13)
Ξ	(2)	(3)	(4)	(5)	(9)	(7)	(8)	(6)	(10)	(6)X(5)	(10%[(5)+(10)]	(11) / (3)
	95001 Opthalmoscope/Otoscope Welch Allyn											
÷	Pocket Junior Set with soft case	1	unit	19,600.00	19,600.00							
	767 Desk Type Welch Allyn Aneroid 7670-16 BP									•		
2	Apparatu	1 ,	unit	33,600.00	33,600.00			*				
	XVXVXVXVXVXVXVXVXVXVXVXVXVXVXVXVX											
	GRAND TOTAL				53,200.00							
Prepared by	d by	Submitted by 🖒	by (h)	1/1		Recommending Approval	lyal		Approved			/
K	7		3	- M.W.		4			i	h	unapar	1

MARYNE A. HERMOSA

Member, BAC Secretariat

CHRISTIAN B, APOSTOL, Ph.D.

Head, BAC Secretariat

CIEDELLE PIOL-SALAZAR, J.D., Ph.D. Chairperson, BAC

Sacaral ENVA MARIE D. APOSTOL, Ph.D.

SUC President III



# Republic of the Philippines MINDORO STATE UNIVERSITY Main Campus

Alcate, Victoria, Oriental Mindoro



#### **PURCHASE REQUEST**

			Fund (	STF						
Office/Section	n:	PR No.: PR Responsibi	25- 003 0 lity Center Code :	Date: 02 ∫ 12	1/2025					
Stock/ Property No.	Unit	Ite	m Description	Qty	Unit Cost	Total Cost				
	unit		noscope/Otoscope Welch unior Set with soft case	1	19,600.00	19,600.00				
	unit	767 Desk Type 16 BP apparat	Welch Allyn Aneroid7670- u	1	33,600.00	33,600.00				
						.:				
			·							
					Total:	53,200.00				
Purpose:										
	For Re	eplacement of	defective medical equip	ment- M	AIN CAMPUS					
0:	Red	quested by:	Recommending Approval:	Certified A	Allotment Available:	Approved by:				
Signature : Printed Name :	ENGR. AR	VIN P. TOLENTINO	JOELENE C. LEYNES	ROVE	LINP. ROXAS	DR. ENYA MARIE D. APOSTOL				
Designation :		for Auxi & Gen. Services	VP for Admin and Finance	Bud	lget Officer III	University President				

STF - 1071 164 -200 - 02-0002-(4) 20321010



Email: universityprosident@minsu.edu.ph Websiter wew.minsu.edu.ph Mubih:: 463 977 846 7228



# MINDORO STATE UNIVERSITY REPUBLIC OF THE PHILIPPINES

Alcate, Victoria Oriental Mindoro

PROJECT PROCUREMENT MANAGEMENT PLAN (PPMP)

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	The state of the s	MODE OF   SCHEDULE/MILESTONE OF ACTIVITIES   Sep   Oct     PROCUREMENT   Jan   Feb   Mar   Apr   May   Jun   Jul   Aug   Sep   Oct	GENERAL DESCRIPTION         Qty         Unit         ESTIMATED         TOTAL         IMODE OF ACTIVITIES           SEMI-EXPENDABLE - MEDICAL EQUIPMENT         Qty         Unit         BUDGET         COST         PROCUREMENT         Jan         Apr         Apr         Apr         Jun         Jun         Jul         Aug         Sep         Oct           Semi-EXPENDABLE - MEDICAL EQUIPMENT         Semi-EXPENDABLE - MEDICAL EQUIPMENT         Security (Sec. 53.9)         S	GENERAL DESCRIPTION         Qty         Unit         ESTIMATED         TOTAL         MODE OF ACTIVITIES           SEMI-EXPENDABLE - MEDICAL EQUIPMENT         Atyles         Apr. May         Jun         Jun         Jun         Jun         Aug         Sep         Oct           SEMI-EXPENDABLE - MEDICAL EQUIPMENT         SEMI-EXPENDABLE - MEDICAL EQUIPMENT         Semil Value Procurement (Sec. 53.9)         Small Value Procurement (Sec. 53	GENERAL DESCRIPTION         Qty         Unit         ESTIMATED         TOTAL         MODE OF ACTIVITIES           SEMI-EXPENDABLE - MEDICAL EQUIPMENT         Aug         SCHEDULE/MILESTONE OF ACTIVITIES         SCHEDULE/MILESTONE OF ACTIVITIES           SEMI-EXPENDABLE - MEDICAL EQUIPMENT         Aug         SCHEDULE/MILESTONE OF ACTIVITIES         SCHEDULE/MILESTONE OF AUG         Aug         Sep         Oct           Allyn Pockel Junior Sel with soft case         1 unit         19,600.00         19,600.00         19,600.00         33,600.00	GENERAL DESCRIPTION         Qty         Unit         ESTIMATED         TOTAL         Mode OF ACTIVITIES         SCHEDULE/MILESTONE OF ACTIVITIES           SEMI-EXPENDABLE - MEDICAL EQUIPMENT         Att DESCRIPTION         Att DESCRIPTION         And DESCRIPTION Set Nith soft case 1 unit soft case 2	GENERAL DESCRIPTION         Qty         Unit         ESTIMATED         TOTAL         Mode OF Mode of Mar         Apr         Apr         Apr         Aun         Jul         Aug         SchEDUL, EMPLESTONE OF ACTIVITIES           SEMI-EXPENDABLE - MEDICAL EQUIPMENT         Apr         May         Jun         Jul         Aug         Sep         Oct           95001 Opthalmoscope/Otoscope Welch         1 unit         19,600.00         19,600.00         19,600.00         19,600.00         19,600.00         33,600.00	GENERAL DESCRIPTION         GAY         Unit         ESTIMATED         TOTAL         MODE OF MAIL         SCHEDULE/MILESTONE OF ACTIVITIES           SEMI-EXPENDABLE - MEDICAL EQUIPMENT         Adv         Unit         BUDGET         COST         PROCUREMENT         Jan         Apr         May         Jun         Aug         Sep         Oct           96001 Opthalmoscope/Otoscope Welch         All unit         19,600.00         19	GENERAL DESCRIPTION         Qty         Unit         ESTIMATED         TOTAL         MODE OF Morr PROCUREMENT         Jan         Feb         Mar         Apr         May         Jun         Aug         Sep         Oct           SEMI-EXPENDABLE - MEDICAL EQUIPMENT         SEMI-EXPENDABLE - MEDICAL EQUIPMENT         All unit         19,600.00 <td< th=""><th>GENERAL DESCRIPTION         Qty         Unit         ESTIMATED         TOTAL         MODE OF SMILE STONE OF ACTIVITIES           SEMI-EXPENDABLE - MEDICAL EQUIPMENT         Ask DIDGET         COST         PROCINEMENT         Jun         Apr         May         Jun         Aug         Spp         Oct           SEMI-EXPENDABLE - MEDICAL EQUIPMENT         Ask DIDGET         COST         PROCINEMENT         Jun         Aug         Jun         Aug         Jun         Aug         Spp         Oct         Aug         Spc         Spc         Oct         Aug         Spc         Spc         Oct         Aug         Spc         Spc         Oct         Aug         Spc         Spc</th></td<> <th>GENERAL DESCRIPTION         GAY         Unit         ESTIMATED         TOTAL         MODE OF MODE OF MAIN SCHEDULE ANII LESTONE OF ACTIVITIES           SEMI-EXPENDABLE - MEDICAL EQUIPMENT         Ask 100 miles         Ask 100 mil</th> <th>GENERAL DESCRIPTION         GRY         Unit         ESTIMATED         TOTAL         MODE OF MODE</th> <th>  GENERAL DESCRIPTION   Qtv   Unit   ESTIMATED   TOTAL   MODE OF   SCHEDULE/MILESTONIE OF ACTIVITIES    </th> <th>  GENERAL DESCRIPTION   City   Unit   ESTTMATED   TOTAL   WODE OF   SCHEDULE MILLESTONE OF ACTIVITIES    </th> <th>  GENERAL DESCRIPTION   Qty   Unit   ESTIMATED   TOTAL   MODE OF   SCHEDULE MINETON   SCHEDULE MINETON   SCHEDULE MINETON   SCHEDULE MINETON   Subject   Sub</th> <th>  GENERAL DESCRIPTION   Cay   Unit   ESTIMATED   TOTAL   MIODE OF   SCHEDULEMILESTONE OF ACTIVITIES    </th> <th>  GENERAL DESCRIPTION   Qtv   Unit   ESTIMATED   TOTAL   MODE OF   Mor   Apr   May   Jun   Jul   Aug   Sep   Oct    </th> <th>  CENERAL DESCRIPTION   CRY   Unit   EUDOET   COST   PROCLIMENT   Jan   Feb   Mar   Apr   May   Jun   Jul   Aug   Sep   Oct    </th> <th>  GENERAL DESCRIPTION   Chy   Duff   ESTRIANTED   TOTAL   MODE OF   SCHEDULE/MILESTONIE OF ACTIVATIES    </th> <th>  CENERAL DESCRIPTION   CRY</th> <th>  CENIERAL DESCRIPTION   Character   COST   FORD CONTRINGENT   Jun   Lat   Apr   May   Jun   Jul   Aug   Sep   Cot    </th>	GENERAL DESCRIPTION         Qty         Unit         ESTIMATED         TOTAL         MODE OF SMILE STONE OF ACTIVITIES           SEMI-EXPENDABLE - MEDICAL EQUIPMENT         Ask DIDGET         COST         PROCINEMENT         Jun         Apr         May         Jun         Aug         Spp         Oct           SEMI-EXPENDABLE - MEDICAL EQUIPMENT         Ask DIDGET         COST         PROCINEMENT         Jun         Aug         Jun         Aug         Jun         Aug         Spp         Oct         Aug         Spc         Spc         Oct         Aug         Spc         Spc         Oct         Aug         Spc         Spc         Oct         Aug         Spc         Spc	GENERAL DESCRIPTION         GAY         Unit         ESTIMATED         TOTAL         MODE OF MODE OF MAIN SCHEDULE ANII LESTONE OF ACTIVITIES           SEMI-EXPENDABLE - MEDICAL EQUIPMENT         Ask 100 miles         Ask 100 mil	GENERAL DESCRIPTION         GRY         Unit         ESTIMATED         TOTAL         MODE OF MODE	GENERAL DESCRIPTION   Qtv   Unit   ESTIMATED   TOTAL   MODE OF   SCHEDULE/MILESTONIE OF ACTIVITIES	GENERAL DESCRIPTION   City   Unit   ESTTMATED   TOTAL   WODE OF   SCHEDULE MILLESTONE OF ACTIVITIES	GENERAL DESCRIPTION   Qty   Unit   ESTIMATED   TOTAL   MODE OF   SCHEDULE MINETON   SCHEDULE MINETON   SCHEDULE MINETON   SCHEDULE MINETON   Subject   Sub	GENERAL DESCRIPTION   Cay   Unit   ESTIMATED   TOTAL   MIODE OF   SCHEDULEMILESTONE OF ACTIVITIES	GENERAL DESCRIPTION   Qtv   Unit   ESTIMATED   TOTAL   MODE OF   Mor   Apr   May   Jun   Jul   Aug   Sep   Oct	CENERAL DESCRIPTION   CRY   Unit   EUDOET   COST   PROCLIMENT   Jan   Feb   Mar   Apr   May   Jun   Jul   Aug   Sep   Oct	GENERAL DESCRIPTION   Chy   Duff   ESTRIANTED   TOTAL   MODE OF   SCHEDULE/MILESTONIE OF ACTIVATIES	CENERAL DESCRIPTION   CRY	CENIERAL DESCRIPTION   Character   COST   FORD CONTRINGENT   Jun   Lat   Apr   May   Jun   Jul   Aug   Sep   Cot

bal Budget

63,200.00

Submitted by:

le. Technical Specification for each Item/Project being proposed shall be submitted as part of the PPMP

pared By:

MARIANNE B. CARCIA, RN Nurse II

CHRISTIAN B. APOSTOL, P.D. Campus Executive Director