



SUPPLY AND DELIVERY OF SUPPLIES AND EQUIPMENT FOR THE DRRM UNIT OF MinSU MAIN

CAMPUS

Name of Project

**BAC Resolution Recommending Approval
Resolution No. 81, s. 2024**

WHEREAS, the **Mindoro State University (MinSU)**, through Bids and Awards Committee (BAC) has advertised in the PhilGEPS and MinSU Website the Request for Quotation (RFQ) for the project **"Supply and Delivery of Supplies and Equipment for the DRRM Unit of MinSU Main Campus"** with an Approved Budget for the Contract (ABC) in the amount of **Seven Hundred Ninety-Eight Thousand Pesos (Php798,000.00)**;

WHEREAS, in response to the said advertisement, seven (7) suppliers were found in the document request list; however, three (3) suppliers in the name of **METDRIE TRADING, MARBOY ENTERPRISES, and IRAYA LIFE ENTERPRISES** 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
Php798,000.00	Metdrie Trading	Php424,600.00
	Marboy Enterprises	Php774,532.00
	Iraya Life Enterprises	Php775,296.00

WHEREAS, upon careful examination, validation and verification of all the eligibility, technical and financial requirements submitted by the suppliers, **IRAYA LIFE ENTERPRISES** passed the evaluation of bid and was found to be complying and responsive; however, the price quotation submitted by **METDRIE TRADING** and **MARBOY ENTERPRISES** was found to be unresponsive and uncompliant;

WHEREAS, METDRIE TRADING was found to be unresponsive and uncompliant due to the following reason:

1. The supplier cannot supply some of the items indicated in the RFQ due to unavailability, specifically the following;
 - Bag Valve mask for Infant
 - Bag Valve mask for Adult
 - Waterproof LED Flashlight (1200 lumen)
 - Rechargeable Megaphone
 - Wireless Microphone Set
 - Trolley Bluetooth Speaker
 - Roll Trashcan (80 Liters)
 - Articulated ladder
 - University Signages
 - Triangular Bandage Cloth
 - Rescue padded Board Splint Set
 - First Aid Box/Medicine Storage

WHEREAS, MARBOY ENTERPRISES was found to be unresponsive and uncompliant, their submitted price quotation was deemed incomplete; specifically, the absence of their Latest Income Tax Return (ITR) as per the requirements outlined in the attached checklist on the 2nd page of the RFQ Form. Thus, this led to the outright disqualification of their price quotation;

WHEREAS, the BAC declared **IRAYA LIFE ENTERPRISES** as the supplier with the Lowest Calculated Responsive Bid (LCRB) for the reason that the first and second suppliers in ranking were disqualified;

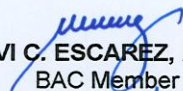


NOW, THEREFORE, the members of Bids and Awards Committee (BAC) HEREBY RESOLVED AS IT IS HEREBY RESOLVED recommended to the Head of Procuring Entity the approval of this resolution for the abovementioned procurement and awarding of contract for the **"Supply and Delivery of Supplies and Equipment for the DRRM Unit of MinSU Main Campus"** to **Iraya Life Enterprises** amounting to **Seven Hundred Seventy-Five Thousand Two Hundred Ninety-Six Pesos (Php775,296.00)** with official address at Bulusan, Calapan City, Oriental Mindoro as the supplier/bidder with the Lowest Calculated Responsive Bid (LCRB);

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


NEMESIO H. DAVALOS, Ph.D.
BAC Chairperson


ANSELMO R. ULEP, JR.
BAC Vice-Chairperson


ELVI C. ESCAREZ, Ph.D.
BAC Member


CIEDELLE P. SALAZAR Ph.D
BAC Member


MELGAR G. FADRIQUELAN
BAC Member

Approved/Disapproved


CHRISTIAN ANTHONY C. AGUTAYA Ph.D.

OIC, Office of the University President

Date: _____



Bid Notice Abstract

Request for Quotation (RFQ)

Reference Number 10765826
Procuring Entity MINDORO STATE UNIVERSITY
Title Supply and Delivery of Supplies and Equipment for the DRRM Unit of MinSU Main Campus
Area of Delivery Oriental Mindoro

Solicitation Number:	RFQ 2024-78	Status	Closed
Trade Agreement:	Implementing Rules and Regulations		
Procurement Mode:	Negotiated Procurement - Small Value Procurement (Sec. 53.9)	Associated Components	1
Classification:	Goods	Bid Supplements	0
Category:	Fire Fighting & Rescue and Safety Equipment		
Approved Budget for the Contract:	PHP 798,000.00	Document Request List	7
Delivery Period:	30 Day/s		
Client Agency:		Date Published	18/04/2024
Contact Person:	MARK LESTER A MAGPANTAY Head, BAC Secretariat Alcate Victoria Oriental Mindoro Philippines 5205 63-9-154612960 macmagpantay@minsu.edu.ph	Last Updated / Time	18/04/2024 00:00 AM
		Closing Date / Time	25/04/2024 17:00 PM

Description

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

NEMESIO H. DAVALOS, Ph.D.

BAC Chairperson

Note: 1. All entries must be typewritten.

2. Delivery Period within ____ calendar days.

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

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

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

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

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

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

1 set 220Volts Fire Alarm Bell with Break Glass switch 17

2 piece Bag Valve mask for Infant 3

3 piece Bag Valve mask for Adult 3

4 piece Waterproof LED Flashlight (1200 lumen) 6

5 piece Rechargeable Megaphone 6

Created by	Annabelle Quinto Madrigal
Date Created	17/04/2024

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REQUEST FOR QUOTATION

Supply and Delivery of Supplies and Equipment for the DRRM Unit of MinSU Main Campus

PR No.: PR24-0171

RFQ No. 2024-78

ABC Amount: Php798,000.00

Company Name : IRAYA LIFE ENTERPRISES
Address : BULUSAN CALAPAN CITY

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

NEMESIO H. DAVALOS, Ph.D.

BAC Chairperson

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

Item No.	Unit	ITEM AND DESCRIPTION	QTY.	UNIT PRICE	TOTAL AMOUNT
1	set	220Volts Fire Alarm Bell with Break Glass switch	17	1260 -	21,420 -
2	piece	Bag Valve mask for Infant	3	2240 -	6720 -
3	piece	Bag Valve mask for Adult	3	2520 -	7560 -
4	piece	Waterproof LED Flashlight (1200 lumen)	6	2057 -	12,342 -
5	piece	Rechargeable Megaphone	6	1352 -	8,112 -
6	piece	Wireless Microphone Set	3	6090 -	18,270 -
7	piece	Trolley Bluetooth Speaker	3	4150 -	12,450 -
8	piece	Roll Trashcan (80 Liters)	12	1426 -	17,112 -
9	piece	Articulated ladder	6	12530 -	75,180 -
10	piece	University Signages	3	840 -	2520 -
11	piece	Triangular Bandage Cloth	60	74 -	4440 -
12	piece	Rescue padded Board Splint Set	3	3815 -	11,445 -
13	piece	First Aid Box/Medicine Storage	46	826 -	37,996 -
14	piece	Fire extinguisher (20lbs)	104	4000 -	416,000 -
15	piece	Fire extinguisher Refill (20lbs)	60	2,000 -	120,000 -
16	piece	radio Communication Walkie Talkie	3	1243 -	3729 -
XX					775,296.00
TOTAL					775,296.00

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

MARIA SOWEN B. MENDOZA
Supplier's Signature over Printed Name

160-221-678-0000

TIN No. of Establishment

69778041725

Contact Number

4.25.2024

Date



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 Supplies and Equipment for the DRRM Unit of MinSU Main Campus

PR No.: PR24-0171

RFQ No. 2024-78

ABC Amount: Php798,000.00

Company Name : **Metdrie Trading**

Address : **Meycauayan Bulacan**

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

NEMESIO H. DAVALOS, Ph.D.

BAC Chairperson

- Note:
1. All entries must be typewritten.
 2. Delivery Period within _____ calendar days.
 3. Warranty shall be for a period of six (6) months for supplies and materials, one (1) year for Equipment, from date of acceptance by the procuring entity.
 4. Price validity shall be a period of 30 calendar days.
 5. G-EPIS 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	set	220Volts Fire Alarm Bell with Break Glass switch	17	3000	51,000
2	piece	Bag Valve mask for Infant	3	No Bid	
3	piece	Bag Valve mask for Adult	3	No Bid	
4	piece	Waterproof LED Flashlight (1200 lumen)	6	No Bid	
5	piece	Rechargeable Megaphone	6	No Bid	
6	piece	Wireless Microphone Set	3	No Bid	
7	piece	Trolley Bluetooth Speaker	3	No Bid	
8	piece	Roll Trashcan (80 Liters)	12	No Bid	
9	piece	Articulated ladder	6	No Bid	
10	piece	University Signages	3	No Bid	
11	piece	Triangular Bandage Cloth	60	No Bid	
12	piece	Rescue padded Board Splint Set	3	No Bid	
13	piece	First Aid Box/Medicine Storage	46	No Bid	
14	piece	Fire extinguisher (20lbs)	104	2900	301,600
15	piece	Fire extinguisher Refill (20lbs)	60	1200	72,000
16	piece	radio Communication Walkie Talkie	3	No Bid	
XX				TOTAL	424,600

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

Marites Palsimon

Supplier's Signature over Printed Name

253-233-566-001

TIN No. of Establishment

09266792380

Contact Number

April 23, 2024

Date

METDRIE TRADING

Unit 1 F.Raymundo St. Pandayan Zone 1
Meycauayan Bulacan

Tel No.: 02 -8861-1373

metdrietradings@rocketmail.com

0926-679-2380 / 0908-418-3007

MSU-BAC-FR-05.01



REQUEST FOR QUOTATION

Supply and Delivery of Supplies and Equipment for the DRRM Unit of MinSU Main Campus

PR No.: PR24-0171

RFQ No. 2024-78

ABC Amount: Php798,000.00

Company Name : Marboy Enterprises
Address : Block 6 Santa Maria Village Calapan

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

NEMESIO H. DAVALOS, Ph.D.
BAC Chairperson

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

Item No.	Unit	ITEM AND DESCRIPTION	QTY.	UNIT PRICE	TOTAL AMOUNT
1	set	220Volts Fire Alarm Bell with Break Glass switch	17	1,250	21,250
2	piece	Bag Valve mask for Infant	3	2,240	6,720
3	piece	Bag Valve mask for Adult	3	2,520	7,560
4	piece	Waterproof LED Flashlight (1200 lumen)	6	2057	12,342
5	piece	Rechargeable Megaphone	6	1352	8,112
6	piece	Wireless Microphone Set	3	6050	18,150
7	piece	Trolley Bluetooth Speaker	3	4150	12,450
8	piece	Roll Trashcan (80 Liters)	12	1426	17,112
9	piece	Articulated ladder	6	12,530	75,180
10	piece	University Signages	3	840	2,520
11	piece	Triangular Bandage Cloth	60	74	4440
12	piece	Rescue padded Board Splint Set	3	3800	11,400
13	piece	First Aid Box/Medicine Storage	46	826	37,996
14	piece	Fire extinguisher (20lbs)	104	4000	416,000
15	piece	Fire extinguisher Refill (20lbs)	60	2000	120,000
16	piece	radio Communication Walkie Talkie	3	1100	3,300
XX					774,532.00
TOTAL					774,532.00

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

Marito Chavez
Supplier's Signature over Printed Name

932-187-835-000

TIN No. of Establishment

0909 985 4737

Contact Number

4/23/2024

Date

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

IRAYA LIFE ENTERPRISES

Bulusan Calapan ,
Calapan City , Oriental Mindoro , Region IV-B , Philippines

is registered in the **Philippine Government Electronic Procurement System (PhilGEPS)** on 05-Jul-2019 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 **IRAYA LIFE ENTERPRISES** 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 25-Aug-2024

Issued this 23rd day of August 2023.

This is a system generated certificate. No signature is required.



REMINDERS ¹

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

List of Eligibility Documents

of

IRAYA LIFE ENTERPRISES

Bulusan Calapan ,
Calapan City , Oriental Mindoro , Region IV-B , Philippines

DTI Certificate	DTI Certificate Number : 3394982 Issued By / Signatory : Ramon Lopez Registration Date : 05-Jan-2022 Expiration Date : 11-Jan-2027
Mayors Permit	Expiration Date : 31-Dec-2024 Permit Number : 0170000049 Place of Issue : Calapan City Issued By / Signatory : Malou F. Morillo Issuance Date : 12-Jan-2024
Tax Clearance	Expiration Date : 19-Jun-2024 TCC Number : RR9A-063-06-19-1043-2023-M Issued By / Signatory : LEVINE F. ILAGAN Issuance date : 19-Jun-2023
Audited Financial Statement	Date of Filing : 28-Apr-2023 Current Asset : 385,512.49 Total Asset : 1,580,508.69 Current Liabilities : 886.19 Total Liabilities : 0.00 Name of Auditor : Elvin P. Vargas 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
CITY OF CALAPAN
OFFICE OF THE CITY MAYOR
BUSINESS PERMIT

TAUMBAYAN
MA SUSUNOD

2024

Pursuant to the provision of City Tax Ordinance Number 18, Series of 2011 as amended, otherwise known as the Revised Revenue Code of Calapan, Oriental Mindoro, after payment of taxes and charges, etc. and compliance with existing requirements, permit is here granted to herein taxpayer.

P 5,287.50

TAXPAYER'S NAME	BUSINESS I.D.	MODE OF PAYMENT	DATE BILLED	KIND OF BUSINESS	STATUS
MENDOZA, MA SOCORRO	0170000049	Annually	01/12/2024	ENTERPRISES	R
NAME OF BUSINESS		LOCATION OF BUSINESS			BUSINESS PERMIT NUMBER
IRAYA LIFE ENTERPRISES		BULUSAN			
KIND OF FEE / TAX	TAX BASE	TAX AMOUNT	SUR/INT	TOTAL	PERIOD
BUSINESS TAX		2,687.50	0.00	2,687.50	
MAYOR'S PERMIT		1,650.00		1,650.00	
MAYORS PERMIT FEE		1,000.00			
EDUC'L SPECIAL PROGR		100.00			
DRAINAGE MAINTENANCE		100.00			
SANITARY FEE		200.00			
FIRE AND SAFETY INSP		250.00			
MEDICAL FEE		100.00		100.00	
ANNUAL INSPECTION FEE		200.00		200.00	
BUSINESS STICKER		300.00		300.00	
SITE INSPECTION FEE		50.00		50.00	
OCCUPATIONAL FEE		220.00		220.00	
TAX CLEARANCE		30.00		30.00	
AAP.&RENEWAL OF BUS.FEE		50.00		50.00	
ENCODER		TOTALS		5,287.50	

Payment for 1-4

Notes:

1. This Permit will expire on

Dec. 31, 2024

2. This Mayor's Permit, together with the official receipt, shall at all times be displayed or posted for public view in a conspicuous place within the place of business or undertaking.

Check
Check number _____
Bank _____

Cash
O.R. Number 1231397
Date 01/12/2024

Payment received by:

ASSESSMENT REVIEWED BY: **EDUARD L. REYES**
Licensing Officer IV
Officer In-charge of the Permits and License Section
Office of the City Mayor

RECOMMENDING APPROVAL:

APPROVED BY: **MARILOU F. MORILLO**
City Mayor

Non-compliance with the applicable provisions of National Building (PD 1069) Code of Sanitation (PD 856), FIRE Code (RA9514), and other existing laws, issuances, regulations and ordinances shall be valid grounds for the immediate cancellation/revocation of this PERMIT.



Omnibus Sworn Statement (Revised)

REPUBLIC OF THE PHILIPPINES)
CITY/MUNICIPALITY OF _____) S.S.

AFFIDAVIT

I, *Maria Socorro C. Mendoza*, of legal age, *Single, Filipino*, and residing at *Sta. Isabel Calapan City*, after having been duly sworn in accordance with law, do hereby depose and state that:

1. I am the sole proprietor of *Iraya Life Enterprises & Iraya Life Events Catering Services* with office address at *Proper 3, Bulusan Calapan City & Calero Calapan City (Branch)*;
2. As the owner and sole proprietor, of *Iraya Life Enterprises & Iraya Life Events Catering Services* I have full power and authority to do, execute and perform any and all acts necessary to participate, submit the bid, and to sign and execute the ensuing contract for SUPPLY & DELIVERY OF SUPPLIES AND EQUIPMENT FOR THE DRMM UNIT OF MINSU MAIN CAMPUS
3. *Iraya Life Enterprises & Iraya Life Events Catering Services*, 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 by itself or by relation, membership, association, affiliation, or controlling interest with another blacklisted person or entity as defined and provided for in the Uniform Guidelines on Blacklisting.
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. *Iraya Life Enterprises & Iraya Life Events Catering Services* is authorizing the Head of the Procuring Entity or its duly authorized representative(s) to verify all the documents submitted;
6. The owner or sole proprietor is 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. *Iraya Life Enterprises & Iraya Life Events Catering Services* complies with existing labor laws and standards; and
8. *Iraya Life Enterprises & Iraya Life Events Catering Services* is aware of and has undertaken the following responsibilities as a Bidder in compliance with the Philippines Bidding Documents, which includes:
 - a) Carefully examine all of the Bidding Documents;
 - b) Acknowledging all conditions, local or otherwise, affecting the implementation of the Contract;
 - c) Making an estimate of the facilities available and needed for the contract to be bid, if any; and

d) Inquire or secure Supplemental/Bid Bulletin(s) issued for the
SUPPLY & DELIVERY of SUPPLIES and EQUIPMENT for THE DRRM
UNIT of MINSU MAIN CAMPUS

9. *Iraya Life Enterprises & Iraya Life Events Catering Services* 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 or fraud with faithfulness 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 25th APRIL 2024 at
Calapan City, Or. Mindoro, Philippines.

MARIA SOLORIO C. MENDOZA
Name of Bidder or It's Authorized Representative
Legal Capacity
Affiant

Witness my hand and seal this 25th day of APRIL 2024.

NAME OF NOTARY PUBLIC

Serial No. of Commission _____
Notary Public for _____ until _____
Roll of Attorneys No. _____
PTR No. _____ [date issued], [place issued]
IBP No. _____ [date issued], [place issued]

Doc. No. 105
Page No. 41
Book No. 124
Series of 1024

ATTY. RAYMOND JOEL L. BALBUENA
Roll of Attorney's No. 61087
IBP Lifetime No. 010769
TR No. 1218347 - Calapan City
MCLE Compliance No. VII-0005057
Notarial Commission until December 31, 2024

REPUBLICA NG PILIPINAS
KAGAWARAN NG PANANALAPI
KAWANIHAN NG RENTAS INTERNAS

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



OCN: 063RC20230000003982
Date OCN Generated: October 9, 2023

CERTIFICATE OF REGISTRATION

TIN & BRANCH CODE 160-221-678-00000	NAME OF TAXPAYER MENDOZA, MARIA SOCORRO CASALLA	TIN ISSUANCE DATE December 7, 1999
REGISTERING OFFICE	<input checked="" type="checkbox"/> Head Office	<input type="checkbox"/> Branch
REGISTERED ADDRESS SITIO PROPER 3, BULUSAN 5200 CITY OF CALAPAN (CAPITAL) ORIENTAL MINDORO PHILIPPINES		

TAX TYPES	FORM TYPES	FILING START DATE	FILING FREQUENCY	FILING DUE DATE
INDIVIDUAL INCOME TAX	1701Q	February 15, 2017	QUARTERLY	1st Quarter-on or before MAY 15 2nd Quarter-on or before AUGUST 15 3rd Quarter-on or before November 15
INDIVIDUAL INCOME TAX	1701	February 15, 2017	ANNUALLY	On or before April 15 of each year covering income for the preceding taxable year.
REGISTRATION FEE	0605	January 18, 2017	ANNUALLY	On or before the last day of January.
VALUE ADDED TAX	2550Q	October 7, 2021	QUARTERLY	Not later than the 25th day following the close of each taxable quarter.
WITHHOLDING TAX - EXPANDED/OTHERS	0619E	October 7, 2021	MONTHLY	On or before the 10th day of the month following the month in which withholding was made.
WITHHOLDING TAX - EXPANDED/OTHERS	1601EQ	October 7, 2021	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, 2022	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	1604CF	April 16, 2019	ANNUALLY	On or before January 31 of the year following the calendar year in which compensation payment and other income payments subject to ginal withholding taxes were paid or accrued.
WITHHOLDING TAX - COMPENSATION	1601C	April 16, 2019	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 January 15 of the succeeding year.

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: 063RC20230000003982

Date OCN Generated: October 9, 2023

CERTIFICATE OF REGISTRATION

TIN & BRANCH CODE 160-221-678-00000	NAME OF TAXPAYER MENDOZA, MARIA SOCORRO CASALLA	TIN ISSUANCE DATE December 7, 1999
REGISTERING OFFICE	<input checked="" type="checkbox"/> Head Office	<input type="checkbox"/> Branch
REGISTERED ADDRESS SITIO PROPER 3, BULUSAN 5200 CITY OF CALAPAN (CAPITAL) ORIENTAL MINDORO PHILIPPINES		

TAXPAYER TYPE/S		SINGLE PROPRIETORSHIP ONLY (RESIDENT CITIZEN)	
BUSINESS INFORMATION DETAILS			
		CATEGORY	REGISTRATION DATE
TRADE NAME 1	IRAYA LIFE ENTERPRISES		January 18, 2017
(PSIC)	47610-RETAIL SALE OF BOOKS, NEWSPAPERS AND STATIONERY IN SPECIALIZED STORES	Primary	
Line of Business	RETAIL SALE OF CULTURAL AND RECREATION GOODS IN SPECIALIZED STORES		
(PSIC)	47529-RETAIL SALE OF CONSTRUCTION SUPPLIES, N.E.C.	Secondary	
Line of Business	RETAIL SALE OF OTHER HOUSEHOLD EQUIPMENT IN SPECIALIZED STORES		
(PSIC)	47412-RETAIL SALE OF COMPUTER PERIPHERAL EQUIPMENT	Secondary	
Line of Business	RETAIL SALE OF COMPUTER PERIPHERAL EQUIPMENT		
(PSIC)	47631-RETAIL SALE OF SPORTING GOODS AND ATHLETIC SUPPLIES	Secondary	
Line of Business	RETAIL SALE OF SPORTING GOODS AND ATHLETIC SUPPLIES		
(PSIC)	47599-RETAIL SALE OF ELECTRICAL HOUSEHOLD APPLIANCES, FURNITURE, LIGHTING EQUIPMENT AND OTHER HOUSEHOLD ARTICLES IN SPECIALIZED STORES, N.E.C.	Secondary	
Line of Business	RETAIL SALE OF ELECTRICAL HOUSEHOLD APPLIANCES, FURNITURE, LIGHTING EQUIPMENT AND OTHER HOUSEHOLD ARTICLES IN SPECIALIZED STORES, N.E.C.		
(PSIC)	47719-RETAIL SALE OF OTHER CLOTHING, FOOTWEAR AND LEATHER ARTICLES IN SPECIALIZED STORES, N. E.C.	Secondary	
Line of Business	RETAIL SALE OF CLOTHING, FOOTWEAR AND LEATHER ARTICLES IN SPECIALIZED STORES		

**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: 063RC20230000003982

Date OCN Generated: October 9, 2023

CERTIFICATE OF REGISTRATION

TIN & BRANCH CODE 160-221-678-00000	NAME OF TAXPAYER MENDOZA, MARIA SOCORRO CASALLA	TIN ISSUANCE DATE December 7, 1999
REGISTERING OFFICE	<input checked="" type="checkbox"/> Head Office	<input type="checkbox"/> Branch
REGISTERED ADDRESS SITIO PROPER 3, BULUSAN 5200 CITY OF CALAPAN (CAPITAL) ORIENTAL MINDORO PHILIPPINES		

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 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.

RDO DRY SEAL

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.

[Home](#) » [Merchants](#) » [Transactions](#) » [Details](#) » [PIN Authentication](#) » [Receipt](#)

Receipt

||||| BUREAU OF INTERNAL REVENUE ORUS DOCUMENTARY STAMP TAX

✔ You have **SUCCESSFULLY** paid Documentary Stamp Tax to **BUREAU OF
INTERNAL REVENUE ORUS** with the following details:

ARN	DSU2310063210499
Registered Name	MARIA SOCORRO MENDOZA
Form Type	0605
Tax Type	DS
Return Period	10-09-23 10:26:36
Email Address	dmariasocorro@yahoo.com
TIN	160221678
Branch Code	00000
Amount Due	PHP 30.00
TOTAL AMOUNT	PHP 30.00
Reference Number	5348-10092023-515983
Date and Time	2023-10-09 10:27:39
Confirmation No.	00010092023102738839
Transaction No.	Zo20231009102738515983



Republic of the Philippines
Department of Finance
Bureau of Internal Revenue

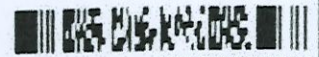
For BIR
Use Only
BCS/
Item:

BIR Form No
1701

January 2016 (ENCS)
Page 1

Annual Income Tax Return

Individuals (including MIXED Income Earner), Estates and Trusts
Enter all required information in CAPITAL LETTERS using BLOCK ink. Mark all applicable boxes with an "X". Two
copies MUST be filed with the BIR and one held by the Taxpayer.



1701 01/16ENCS P1

1 For the year 12 / 20 23		2 Amended Return? Yes <input type="checkbox"/> No <input type="checkbox"/>		3 Short Period Return? Yes <input type="checkbox"/> No <input type="checkbox"/>	
PART I - Background Information on Taxpayer/Filer					
4 Taxpayer Identification Number (TIN) 160 - 221 - 678 - 000				5 RDO Code 063	
6 Taxpayer Type Single Proprietor <input type="checkbox"/> Professional <input type="checkbox"/> Estate <input type="checkbox"/> Trust <input type="checkbox"/> Compensation Earner <input type="checkbox"/>					
7 Alphabetic Tax Code (ATC) B012 Business Income - Graduated IT Rates <input type="checkbox"/> B014 Income from Profession - Graduated IT Rates <input type="checkbox"/> B013 Mixed Income - Graduated IT Rates <input type="checkbox"/> B011 Compensation Income - 8% IT Rate <input type="checkbox"/> B015 Business Profession - 8% IT Rate <input type="checkbox"/> B017 Income from Income - 8% IT Rate <input type="checkbox"/> B016 Mixed Income - 8% IT Rate <input type="checkbox"/>					
8 Taxpayer's Name (Last Name, First Name, Middle Name for Individual) / ESTATE OF (First Name, Middle Name, Last Name) / TRUST FAO (First Name, Middle Name, Last Name) MUNOZA MARIA SOCORRO CASALLA					
9 Registered Address (Indicate complete address. If the registered address is different from the current address, go to the RDO to update registered address by using BIR Form 1905) SITIO PROPER 3, BULUSAN CITY OF CALAPAN CAPITAL, ORI					
				9A Zip Code	5200
10 Date of Birth (MM/DD/YYYY) 09/25/1971		11 Email Address irayalife.fc@yahoo.com			
12 Citizenship FILIPINO		13 Claiming Foreign Tax Credits? Yes <input type="checkbox"/> No <input type="checkbox"/>		14 Foreign Tax Number (if applicable)	
15 Contact Number 15 (Landline/Cellphone No.) 09308147583		16 Civil Status (if applicable) Single <input type="checkbox"/> Married <input type="checkbox"/> Legally Separated <input type="checkbox"/> Widower <input type="checkbox"/>			
17 If married, spouse has income? Yes <input type="checkbox"/> No <input type="checkbox"/>				18 Filing Status Joint Filing <input type="checkbox"/> Separate Filing <input type="checkbox"/>	
19 Income EXEMPT from Income Tax? Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, fill out also consolidation of ALL activities per Tax Regime (Part XI))				20 Income subject to SPECIAL/PREFERENTIAL RATE? Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, fill out also consolidation of ALL activities per Tax Regime (Part XI))	
21 Tax Rate* (choose one) * Graduated Rates (Choose Method of Deduction in Item 21A) <input type="checkbox"/> 8% in lieu of Graduated Rates under Sec. 24(A) and Percentage Tax under Sec. 116 of NRC (available if gross sales/receipts and other non-operating income do not exceed Three million pesos (P3M)) <input type="checkbox"/>					
21A Method of Deduction (choose one) Itemized Deduction (Sec. 34(A-J) NRC) <input type="checkbox"/> Optional Standard Deduction (OSD) (40% of Gross Sales/Receipts/Revenues/Fees (Sec. 34(L) NRC) <input type="checkbox"/>					

PART II - Total Tax Payable		
Particulars	A. Taxpayer/Filer	B. Spouse
22 Tax Due (From Part VI Item 5)	44,936	0
23 Less: Total Tax Credits / Payments (From Part VII Item 10)	41,550	0
24 Tax Payable/(Overpayment) (Item 22 Less Item 23)	3,386	0
25 Less: Portion of Tax Payable Allowed for 2nd Installment to be paid on or before October 15 (50% or less of Item 22)	0	0
26 Amount of Tax Payable/(Overpayment) (Item 24 Less Item 25)	3,386	0
Add: Penalties 27 Interest	0	0
28 Surcharge	0	0
29 Compromise	0	0
30 Total Penalties (Sum of Items 27 to 29)	0	0
31 Total Amount Payable/(Overpayment) (Sum of Items 26 & 30)	3,386	0
32 Aggregate Amount Payable/(Overpayment) (Sum of Items 31A & 31B)		3,386
If overpayment, mark one (1) box only. (Once the choice is made, the same is irrevocable)		
To be refunded <input type="checkbox"/> To be issued a Tax Credit Certificate (TCC) <input type="checkbox"/> To be carried over as tax credit for next year/quarter <input type="checkbox"/>		

I declare under the penalties of perjury that this return and all its attachments have been made in good faith, verified by me, and to the best of my knowledge and belief, are true and correct, pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under authority thereof. Further, I give my consent to the processing of my information as contemplated under the Data Privacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes. (If signed by an Authorized Representative, indicate TIN and attach authorization letter)

Printed Name and Signature of Taxpayer/Authorized Representative	33 Number of Attachments 0
--	----------------------------

PART III - Details of Payment				
Particulars	Drawee Bank/Agency	Number	Date (MM/DD/YYYY)	Amount
34 Cash/Bank Debit Memo				
35 Check				
36 Tax Debit Memo				
37 Others (Specify Below)				
Machine Validation / Revenue Official Receipt Details (if not filed with an Authorized Agent Bank)			Stamp of Receiving Office/AAB and Date of Receipt (RO's Signature/Bank Teller's Initial)	

Annual Income Tax Return

Individuals (including MIXED Income Earner), Estates and Trusts



170106/18ENCSP5

TIN

160 - 221 - 678 - 000

Tax Filer's Last Name

MENDOZA

PART IV - Background Information of Spouse

1 Spouse's Taxpayer Identification Number

2 RDO Code

3 Filer's Spouse Type

Single Proprietor

Professional

Compensation Earner

4 Alphanumeric Tax Code (ATC)

II012 Business Income-Graduated IT Rates

II014 Income from Profession-Graduated IT Rates

II013 Mixed Income-Graduated IT Rates

II011 Compensation Income

II015 Business Income - 8% IT Rate

II017 Income from Profession - 8% IT Rate

II016 Mixed Income - 8% IT Rate

5 Spouse's Name (Last Name, First Name, Middle Name)

6 Contact Number

7 Citizenship

8 Claiming Foreign Tax Credits?

Yes No

9 Foreign Tax Number (if applicable)

10 Income EXEMPT from Income Tax?

Yes No

11 Income subject to SPECIAL/PREFERENTIAL RATE?

Yes No

(If yes, fill out also consolidation of ALL Activities per Tax Regime (Part X))

(If yes, fill out also consolidation of ALL activities per Tax Regime (Part X))

12 Tax Rate* (choose one)

Graduated Rates (Choose Method of Deduction in Item 12A)

8% in lieu of Graduated Rates under Sec. 24(A) and Percentage Tax under Sec. 116 of NIRC [available if gross sales/receipts and other non-operating income do not exceed Three million pesos (P3M)]

12A Method of Deduction (choose one)

Itemized Deduction [Sec. 34(A-J), NIRC]

Optional Standard Deduction (OSD) [40% of Gross Sales/Receipts/Revenues/Fees [Sec. 34(L), NIRC]

PART V - Computation of Tax

Schedule 1 - Gross Compensation Income and Tax Withheld (Attach Additional Sheets if necessary)

On Items 1 and 2 enter the required information for each of your employers and mark (X) whether the information is for the Taxpayer or the Spouse. On Item 3A, enter the Total Gross Compensation and Total Tax Withheld for the Taxpayer and on Item 3B, for the Spouse. (DO NOT enter Centavos, 49 Centavos or Less drop down, 50 or more round up)

a. Name of Employer

1 Taxpayer

Spouse

b. Employer's TIN

2 Taxpayer

Spouse

b. Employer's TIN

(Continuation of Table Above)

c. Compensation Income

d. Tax Withheld

1	0	0
2	0	0

3A Gross Compensation Income and Total Tax Withheld for TAXPAYER (To Part V Schedule 2 Item 4A and Part VII Item 5A)

0

0

3B Gross Compensation Income and Total Tax Withheld for SPOUSE (To Part V Schedule 2 Item 4B and Part VII Item 5B)

0

0

Schedule 2 - Taxable Compensation Income (DO NOT enter Centavos; 49 Centavos or Less drop down; 50 or more round up)

Particulars	A. Taxpayer/Filer	B. Spouse
4 Gross Compensation Income (From Part V Schedule 1 Item 3A/3Bc)	0	0
5 Less: Non-Taxable / Exempt Compensation	0	0
6 Taxable Compensation Income (Item 4 Less Item 5)	0	0
7 Tax Due-Compensation Income (Item 6 x applicable Income Tax Rate)	0	0

Schedule 3 - Taxable Business Income (If graduated rates, fill in items 8 to 24; if 8% flat income tax rate, fill in items 25 to 30)

3A- For Graduated Income Tax Rates

8 Sales Revenues Receipts/Fees	3,756,213	0
9 Less: Sales Returns, Allowances and Discounts	0	0
10 Net Sales Revenues/Receipts/Fees (Item 8 Less Item 9)	3,756,213	0
11 Less: Cost of Sales/Services (applicable only if availing Itemized Deductions)	2,938,642	0
12 Gross Income/(Loss) from Operation (Item 10 Less Item 11)	817,571	0
Less: Deductions Allowable under Existing Laws		
13 Ordinary Allowable Itemized Deductions (From Part V Schedule 4 Item 18)	305,392	0
14 Special Allowable Itemized Deductions (From Part V Schedule 5 Item 3 and/or Item 6)	0	0
15 Allowance for Net Operating Loss Carry Over (NOLCO) (From Part V Schedule 6 Item 8 and/or Item 13)	0	0
16 Total Allowable Itemized Deductions (Sum of Items 13 to 15)	305,392	0

OR

17 Optional Standard Deduction (OSD) (40% of Item 10)	0	0
18 Net Income/(Loss) (If Itemized: Item 12 Less Item 16; If OSD: Item 10 Less Item 17)	512,179	0

Add: Other Non-Operating Income (specify below)

19	0	0
20	0	0
21 Amount Received/Share in Income by a Partner from General Professional Partnership (GPP)	0	0
22 Total Other Non-Operating Income (Sum of Items 19 to 21)	0	0
23 Taxable Income-Business (Sum of Items 18 and 22)	512,179	0
24 Total Taxable Income - Compensation and Business (Sum of Items 6 and 23)	512,179	0
25 Total Tax Due-Compensation and Business Income (under graduated rates) (Item 24 x applicable income tax rate) (To Part VI Item 1)	44,936	0

BIR Form No. 1701 January 2018 (ENC5) Page 3	Annual Income Tax Return Individuals (including MIXED Income Earner), Estates and Trusts	 1701 01/18ENC5 P3
TIN 160 - 221 - 678 - 000	Taxpayer/Filer's Last Name AMENDOZA	

3.B - For 8% Flat Income Tax Rate (DO NOT Enter Contents 48 Centavo or Less drop)		
Particulars	A) Taxpayer/Filer	B) Spouse
26 Sales Revenues/Receipts less (net of sales returns, allowances and discounts)	0	0

Add Other Non-Operating Income (specify below)		
27	0	0
28 Total Income (Sum of Items 26 and 27)	0	0
29 Less: Allowable reduction from gross sales/receipts and other non-operating income of purely self-employed individuals and/or professionals in the amount of P250,000 (not applicable if with compensation income)	0	0
30 Taxable Income (Less) (Item 28 Less Item 29)	0	0
31 Tax Due-Business Income (Item 30 x 8% Flat Income Tax Rate)	0	0
32 Total Tax Due-Compensation and Business Income (under flat rate) (Sum of Items 31 and 31) (To Part V, Item 1)	0	0

Schedule 4 - Ordinary Allowable Itemized Deductions (attach additional sheet/s, if necessary)		
1 Amortizations	0	0
2 Bad Debts	0	0
3 Charitable and Other Contributions	0	0
4 Depletion	0	0
5 Depreciation	21,850	0
6 Entertainment, Amusement and Recreation	0	0
7 Fringe Benefits	0	0
8 Interest	0	0
9 Losses	0	0
10 Pension Trusts	0	0
11 Rental	0	0
12 Research and Development	0	0
13 Salaries, Wages and Allowances	104,000	0
14 SSS, GSIS, Philhealth, HDMF and Other Contributions	25,359	0
15 Taxes and Licenses	33,331	0
16 Transportation and Travel	35,930	0
17 Others (Deductions Subject to Withholding Tax and Other Expenses) (specify below. Attach additional sheet/s, if necessary)		
a Janitorial and Messengerial Services	0	0
b Professional Fees	12,000	0
c Security Services	0	0
d SEE FINANCIAL STATEMENTS	72,922	0
18 Total Ordinary Allowable Itemized Deductions (Sum of Items 1 to 17d) (To Part V, Schedule 3 A Item 13)	305,392	0

Schedule 5 - Special Allowable Itemized Deductions (attach additional sheet/s, if necessary)			
5.A - Taxpayer/Filer	Description	Legal Basis	Amount
1			0
2			0
3 Total Special Allowable Itemized Deductions-Taxpayer/Filer (Sum of Items 1 and 2) (To Part V, Schedule 3 A Item 14A)			0
5.B - Spouse	Description	Legal Basis	Amount
4			0
5			0
6 Total Special Allowable Itemized Deductions-Spouse (Sum of Items 4 and 5) (To Part V, Schedule 3 A Item 14B)			0

Schedule 6 - Computation of Net Operating Loss Carry Over NOLCO		
6.A - Computation of NOLCO		
Description	A. Taxpayer/Filer	B. Spouse
1 Gross Income	0	0
2 Less: Ordinary Allowable Itemized Deductions	0	0
3 Net Operating Loss (Item 1 Less Item 2) (To Schedule 6 A 1 Item 7A &/or Schedule 6 A 2 Item 12A)	0	0

6.A.1 - Taxpayer/Filer's Detailed Computation of Available NOLCO					
Net Operating Loss		B. NOLCO Applied Previous Year/s	C. NOLCO Expired	D. NOLCO Applied Current Year	E. Net Operating Loss (Unapplied) [(E) = A - (B+C+D)]
Year Incurred	A. Amount				
4	0	0	0	0	0
5	0	0	0	0	0
6	0	0	0	0	0
7	0	0	0	0	0
8 Total NOLCO - Taxpayer/Filer (Sum of Items 4D to 7D) (To Part V, Schedule 3 A Item 15A)					0

1701January 2018 (ENC5)
Page 4**Annual Income Tax Return**
Individuals (including MIXED Income Earner), Estates and Trusts

1701 01/18ENC5 P4

TIN

160

221

678

000

Taxpayer/Filer's Last Name

MF NED 17A

(Continuation of Schedule 6)

6.A.2 – Spouse's Detailed Computation of Available NOLCO

Year Incurred:	Net Operating Loss A. Amount	B. NOLCO Applied Previous Year/s	C. NOLCO Expired	D. NOLCO Applied Current Year	E. Net Operating Loss (Unapplied) [(E) = A - (B+C+D)]
9					
10					
11					
12	0	0	0	0	0
13	Total NOLCO - Spouse (Sum of Items 9D to 12D) (To Part V Schedule 3 A Item 15B)				0

PART VI – Summary of Income Tax Due

1	Regular Rate Income Tax Due (From Part V, Either Item 25 or Item 32)	44,936	0
2	Special Rate Income Tax Due (From Part X Item 17B/17F)	0	0
3	Less: Share of Other Government Agency if remitted directly to the Agency	0	0
4	Net Special Rate Income Tax Due Share of National Govt. (Item 2 Less Item 3)	0	0
5	Total Income Tax Due (Sum of Items 1 & 4) (To Part II Item 22)	44,936	0

PART VII – Tax Credits/Payments (attach proof)

1	Prior Year's Excess Credits	0	0
2	Tax Payments for the First Three (3) Quarters	0	0
3	Creditable Tax Withheld for the First Three (3) Quarters	23,335	0
4	Creditable Tax Withheld per BIR Form No. 2307 for the 4 th Quarter	18,215	0
5	Creditable Tax Withheld per BIR Form No. 2316 (From Part V Schedule 3 Item 3A/3Bd)	0	0
6	Tax Paid in Return Previously Filed, if this is an Amended Return	0	0
7	Foreign Tax Credits, if applicable	0	0
8	Special Tax Credits, if applicable (To Part VIII Item 6)	0	0
Other Tax Credits/Payments (Sum of 1-8)			

9

0

0

10 Total Tax Credits/Payments (Sum of Items 1 to 9) (To Part II Item 23)

41,550

0

PART VIII – Tax Relief Availment

VIII.A – Special Rate			
1	Regular Income Tax Otherwise Due (Part X Item 16B &/or Item 16F X applicable regular income tax rate)	0	0
2	Tax Relief on Special Allowable Itemized Deductions (Part X Item 7B and/or Item 7F X applicable regular income tax rate)	0	0
3	Sub-Total – Tax Relief (Sum of Items 1 and 2)	0	0
4	Less: Income Tax Due (From Part X Item 17B and/or Item 17F)	0	0
5	Tax Relief Availment Before Special Tax Credit (Item 3 Less Item 4)	0	0
6	Add: Special Tax Credit, if any (From Part VII Item 8)	0	0
7	Total Tax Relief Availment- SPECIAL (Sum of Items 5 and 6)	0	0

VIII.B – Exempt			
8	Regular Income Tax Otherwise Due (Part X Item 16A &/or Item 16E X applicable regular income tax rate)	0	0
9	Tax Relief on Special Allowable Itemized Deductions (Part X Item 7A and/or Item 7E X applicable regular income tax rate)	0	0
10	Total Tax Relief Availment- EXEMPT (Sum of Items 8 and 9)	0	0

PART IX – Reconciliation of Net Income per Books Against taxable Income (Attach additional sheets if necessary)

Particulars	A) Taxpayer/Filer	B) Spouse
1 Net Income/(Loss) per Books	512,179	0
Add: Non-Deductible Expenses/Taxable Other Income		

2

3

4

5 Total (Sum of Items 1 to 4)

512,179

0

Less: A) Non-Taxable Income and Income Subjected to Final Tax

6

7

B) Special/Other Allowable Deductions

8

9

10 Total (Sum of Items 5 to 9)

0

0

11 Net Taxable Income/(Loss) (Item 5 Less Item 10)

512,179

0

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

If Taxable Income is:	Tax Due is:
Not over P 250,000	0%
Over P 250,000 but not over P 400,000	20% of the excess over P 250,000
Over P 400,000 but not over P 800,000	P 30,000 + 25% of the excess over P 400,000
Over P 800,000	P 110,000 + 30% of the excess over P 800,000

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

If Taxable Income is:	Tax Due is:
Not over P 250,000	0%
Over P 250,000 but not over P 400,000	15% of the excess over P 250,000
Over P 400,000 but not over P 800,000	P 22,500 + 20% of the excess over P 400,000
Over P 800,000	P 110,000 + 30% of the excess over P 800,000

1701

January 2018 (ENCS)
Page 1m

Annual Income Return

Consolidation of ALL Activities per Tax Regime (Accomplish only if with MULTIPLE Tax Regimes)

1701-01-18-ENCS Print

Taxpayer Identification Number (TIN)	Tax Filer's Last Name	
160 221 678 000	MENDOZA	

Part X - CONSOLIDATED COMPUTATION BY TAX REGIME

Instructions (mark appropriate box)

A. Only one activity/project under EXEMPT and/or SPECIAL Tax Regimes, fill-out the applicable columns below.
B. Two or more activities/projects under EXEMPT and/or SPECIAL Tax Regimes, accomplish Part XI - Mandatory Attachments per activity and reflect consolidated amounts from Part XI on the corresponding columns below.

SCHEDULE A - Basis of Tax Relief Particulars	TAXPAYER			SPOUSE		
	A. Exempt	B. Special	C. Regular	D. Exempt	E. Special	F. Regular
1 Investment Promotion Agency (IPA)/Implementing Government Entity						
2 Legal Basis						
3 Registered Activity Program (Reg No.)						
4 Special Tax Rate		0 %				0 %
5 Effectivity Date of Tax Relief/Exemption From (MM/DD/YYYY)						
6 Expiration Date of Tax Relief/Exemption To (MM/DD/YYYY)						

(DO NOT enter Carrievans, 49 Carrievans or Less drop down; 50 or more rounded up)

SCHEDULE B - Computation of Income Tax	TAXPAYER/FILER				SPOUSE			
	A. Total Exempt	B. Total Special	C. Regular	D. Total (D = A + B + C)	E. Total Exempt	F. Total Special	G. Regular	H. Total (H = E + F + G)
1 Sales/Revenues/Receipts/Fees (EXEMPT/SPECIAL: If letter B of instructions above is marked, from all of Part XI Schedule B Item 1A/1B) (REGULAR: From Part V Schedule 3 A Item 6A/6B)	0	0	3,756,213	3,756,213	0	0	0	0
2 Less: Sales Returns, Allowances and Discounts (EXEMPT/SPECIAL: If letter B of instructions above is marked, from all of Part XI Schedule B Item 2A/2B) (REGULAR: From Part V Schedule 3 A Item 9A/9B)	0	0	0	0	0	0	0	0
3 Net Sales/Revenues/Receipts/Fees (Item 1 Less Item 2)	0	0	3,756,213	3,756,213	0	0	0	0
4 Less: Cost of Sales/Services (EXEMPT/SPECIAL: If letter B of instructions above is marked, from all of Part XI Schedule B Item 4A/4B) (REGULAR: From Part V Schedule 3 A Item 11A/11B)	0	0	2,938,642	2,938,642	0	0	0	0
5 Gross Income/(Loss) from Operation (Item 3 Less Item 4)	0	0	817,571	817,571	0	0	0	0
Less: Deductions Allowable under Existing Laws								
6 Ordinary Allowable Itemized Deductions (EXEMPT/SPECIAL: From Schedule C Item 18) and/or (If letter B of instruction above is marked, from all of Part XI Schedule B Item 6A/6B) (REGULAR: From Part V Schedule 3 A Item 13A/13B)	0	0	305,392	305,392	0	0	0	0
7 Special Allowable Deductions (EXEMPT/SPECIAL: From Schedule D Item 5) and/or (If letter B of instruction above is marked, from all of Part XI Schedule B Item 7A/7B) (REGULAR: From Part V Schedule 3 A Item 14A/14B)	0	0	0	0	0	0	0	0
8 Allowance for Net Operating Loss Carry Over (NOLCO) From Part V Sched 3 A Item 15A/15B								
9 Total Allowable Itemized Deductions (Sum of Items 6 to 8)	0	0	305,392	305,392	0	0	0	0
OR								
10 Optional Standard Deduction (OSD) (40% of Item 3)			0	0				
11 Net Income/(Loss) (Item 5 Less Item 9, 10, or 10) (Less Item 10)	0	0	512,179	512,179	0	0	0	0
Add: Other Non-Operating Income (specify below) (EXEMPT/SPECIAL: If letter B of instructions above is marked, from all of Part XI Schedule B Items 10A/10B and 11A/11B) (REGULAR: From Part V Schedule 3 A Items 19A/19B and 20A/20B)								
12	0	0	0	0	0	0	0	0
13	0	0	0	0	0	0	0	0
14 Amount Received/Share in Income by a Partner from a GPP (From Part V Schedule 3 A Item 21A/21B)			0	0				
15 Total Other Non-Operating Income (Sum of Items 12 to 14)	0	0	0	0	0	0	0	0
16 Total Taxable Income/(Loss) (Sum of Items 11 to 15)	0	0	512,179	512,179	0	0	0	0
17 TAX DUE - (Exempt/Item 16A/16E x 0%) and/or (From all of Part XI Schedule B Item 15) [Special: (Item 50/5F x applicable income tax rate) and/or (From all of Part XI schedule B Item 15)] Regular: (From Part V Item 31)	0	0	44,936	44,936	0	0	0	0

1701January 2018 (ENCS)
Page 2m**Annual Income Return**
Consolidation of ALL Activities per Tax Regime

1701 01 18 ENCS P2m

Taxpayer Identification Number (TIN)

60 221 678 000

Tax Filer's Last Name

MENDOZA

Schedule C - Ordinary Allowable Itemized Deductions (attach additional sheet/s, if necessary)

(DO NOT enter Centavos: 49 Centavos or Less drop down; 50 or more round up)

Description	TAXPAYER/FILER		SPOUSE	
	A. Exempt	B. Special	C. Exempt	D. Special
1 Amortizations	0	0	0	0
2 Bad Debts	0	0	0	0
3 Charitable and Other Contributions	0	0	0	0
4 Depletion	0	0	0	0
5 Depreciation	0	0	0	0
6 Entertainment, Amusement and Recreation	0	0	0	0
7 Fringe Benefits	0	0	0	0
8 Interest	0	0	0	0
9 Losses	0	0	0	0
10 Pension Trusts	0	0	0	0
11 Rental	0	0	0	0
12 Research and Development	0	0	0	0
13 Salaries, Wages and Allowances	0	0	0	0
14 SSS, GSIS, Philhealth, HDMF and Other Contributions	0	0	0	0
15 Taxes and Licenses	0	0	0	0
16 Transportation and Travel	0	0	0	0
17 Others (Deductions Subject to Withholding Tax and Other Expenses) [Specify below. Add additional sheet(s), if necessary]				
a Janitorial and Messengerial Services	0	0	0	0
b Professional Fees	0	0	0	0
c Security Services	0	0	0	0
d	0	0	0	0
18 Total Ordinary Allowable Itemized Deductions (Sum of Items 1 to 17d) (To Part X Schedule B Item 6)	0	0	0	0

Schedule D - Special Allowable Itemized Deductions (attach additional sheet/s, if necessary)

(DO NOT enter Centavos: 49 Centavos or Less drop down; 50 or more round up)

Description	Legal Basis	Taxpayer/Filer		Spouse	
		A. Exempt	B. Special	C. Exempt	D. Special
1		0	0	0	0
2		0	0	0	0
3		0	0	0	0
4		0	0	0	0
5 Total Special Allowable Itemized Deductions (Sum of Items 1 to 4) (To Part X Schedule B Item 7)		0	0	0	0



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

TCBP NO. RR9A-063-06-19-1043-2023-M

TAX CLEARANCE CERTIFICATE

(Pursuant to Executive Order No. 398)

MENDOZA, MARIA SOCORRO CASALLA
(IRAYA LIFE ENTERPRISES)
Name of Taxpayer

SITIO PROPER 3, BULUSAN, CITY OF CALAPAN (CAPITAL), ORIENTAL MINDORO
Address

160-221-678-00000
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 19th day of June, 2023.

NOTE: THIS CERTIFICATE SHALL BE VALID AND EFFECTIVE FROM DATE OF ISSUE UNTIL JUNE 19, 2024 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 JUNE 14, 2023 UNDER EFPS PAYMENT TRANSACTION NO. 235204712. ANY ERASURE MADE ON THIS TCC SHALL RENDER IT NULL AND VOID.



Ilagan
LEVINE B. ILAGAN
Chief, Collection Division
06/14/2023



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



This certifies that

IRAYA LIFE ENTERPRISES
(BARANGAY)

BULUSAN, CITY OF CALAPAN (CAPITAL) ORIENTAL MINDORO - REGION IV-B (MIMAROPA)

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

MARIA SOCORRO CASALLA MENDOZA

is valid from 11 January 2022 to 11 January 2027 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 05 January 2022 in the Philippines.


RAMON M. LOPEZ
Secretary

Business Name No. 3394982

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



CGYH873612971616

APPROVED BUDGET FOR THE CONTRACT (ABC)
Supply and Delivery of Supplies and Equipment for the DRRM Unit of MinSU Main Campus
Alcate, Victoria, Oriental Mindoro
Project Name and Location

Stations: Mindoro State University

Length:


Contract Duration:

ITEM NO.	DESCRIPTION	QUANTITY	UNIT	CURRENT MARKET PRICE	TOTAL COST	VAT, OTHER TAXES AND/OR DUTIES APPLICABLE	FREIGHT & INSURANCE	OTHER INDIRECT COSTS	OTHER COST FACTORS		TOTAL COST	UNIT COST
									INFLATION,			
									%	VALUE		
									%	VALUE		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
										(5)X(9)	(10%[(5)+(10)]	(11) / (3)
1	220Volts Fire Alarm Bell with Break Glass switch	17	set	2,000.00	34,000.00							
2	Bag Valve mask for Infant	3	piece	2,000.00	6,000.00							
3	Bag Valve mask for Adult	3	piece	3,000.00	9,000.00							
4	Waterproof LED Flashlight (1200 lumen)	6	piece	1,500.00	9,000.00							
5	Rechargeable Megaphone	6	piece	5,000.00	30,000.00							
6	Wireless Microphone Set	3	piece	5,000.00	15,000.00							
7	Trolley Bluetooth Speaker	3	piece	8,000.00	24,000.00							
8	Roll Trashcan (80 Liters)	12	piece	1,200.00	14,400.00							
9	Articulated ladder	6	piece	5,000.00	30,000.00							
10	University Signages	3	piece	15,000.00	45,000.00							
11	Triangular Bandage Cloth	60	piece	80.00	4,800.00							
12	Rescue padded Board Splint Set	3	piece	6,000.00	18,000.00							
13	First Aid Box/Medicine Storage	46	piece	300.00	13,800.00							
14	Fire extinguisher (20lbs)	104	piece	4,000.00	416,000.00							
15	Fire extinguisher Refill (20lbs)	60	piece	2,000.00	120,000.00							
16	radio Communication Walkie Talkie	3	piece	3,000.00	9,000.00							
	XXXXXXXXXXXXXXXXXXXXXXXXXXXX				-							
	GRAND TOTAL				798,000.00							

Prepared by
REMELITO C. RICO
Member, BAC Secretariat

Submitted by:
Engr. MARK LESTER A. MAGPANTAY
Head, BAC Secretariat

Recommending Approval: _____
NEMESIO H. DAVALOS, Ph.D.
 Chairperson, BAC

Approved: 
CHRISTIAN ANTHONY C. AGUTAYA, Ph.D.
 OIC, Office of the University President

