

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



SUPPLY AND DELIVERY OF SEMI-EXPENDABLE FURNITURE & FIXTURES FOR MIS AND DRRM OFFICES AT MinSU BONGABONG CAMPUS

Name of Project

BAC Resolution Recommending Approval Resolution No. <u>97</u>, 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 Semi-Expendable Furniture & Fixtures for MIS and DRRM Offices at MinSU Bongabong Campus" with an Approved Budget for the Contract (ABC) in the amount of Fifty-Seven Thousand Two Hundred Sixty Pesos (Php57,260.00);

WHEREAS, in response to the said advertisement, two (2) suppliers were found in the document request list; however, only one (1) supplier in the name of 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 |
|---|------------------------|-----------------|
| Php57,260.00 | Iraya Life Enterprises | Php55,992.00 |

WHEREAS, the BAC examined and verified the price quotations submitted by the abovementioned supplier and was found to be complying and responsive; thus, the project be awarded to the supplier in the name of IRAYA LIFE ENTERPRISES with Single Calculated Responsive Bid (SCRB);

NOW, THEREFORE, the members of Bids and Awards Committee (BAC) HEREBY RESOLVED AS IT IS HEREBY RESOLVED recommended to the Head of Procuring Entity the approval of this resolution for the abovementioned procurement and awarding of contract for the "Supply and Delivery of Semi-Expendable Furniture & Fixtures for MIS and DRRM Offices at MinSU Bongabong Campus" to Iraya Life Enterprises amounting to Fifty-Five Thousand Nine Hundred Ninety-Two Pesos (Php55,992.00) with official address at Bulusan, Calapan City, Oriental Mindoro as the supplier/bidder with Single Calculated Responsive Bid (SCRB);

RESOLVED, at MinSU Main Campus, Algate, Victoria, Oriental Mindoro, this 10th day of May, 2024.

NEMESIO H. DAVALOS, Ph.D.

BAC Chairperson

ANSELMO R. ULEP, JR. BAG Vice-Chairperson

CIEDELLE P. SALAZAR Ph.D

BAC Member

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

MELGAR G. FADRIQUELAN

BAC Member

Approved/Disapproved

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

Date:



Central Portal for Philippine Government Procurement Oppurtunities

Philippine Government Electronic Procurement System

Bid Notice Abstract

Request for Quotation (RFQ)

Reference Number

10796222

Procuring Entity

MINDORO STATE UNIVERSITY

Title

Supply and Delivery of Semi-Expendable Furniture & Fixtures for MIS and DRRM Offices at

MinSU Bongabong Campus

Area of Delivery

Oriental Mindoro

| Solicitation Number: | RFQ 2024-81 | 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: | Furniture | | |
| Approved Budget for the Contract: | PHP 57,260.00 | Document Request List | 2 |
| Delivery Period: | 30 Day/s | | |
| Client Agency: | | | |
| Contact Person: | Annabelle Quinto Madrigal | Date Published | 27/04/2024 |
| | BAC Head Secretariat MinSU Calapan Campus Masipit Calapan City Oriental Mindoro | Last Updated / Time | 27/04/2024 00:00 AM |
| | Philippines 5200 63-43-2862368 | Closing Date / Time | 02/05/2024 01:00 AM |
| | minsu.bacoffice@gmail.com | | |

Description

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

NEMESIO H. DAVALOS, Ph.D.

BAC Chairperson

Note: 1. All entries must be typewritten.

- 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.
- 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 units Office table 2 w/ 4 drawers & lock L=55"xW27.5"xH30.25 2 units Office Swivel Chair 5

Ergonomic Office Chair recline 90-120 degree Headrest: Adjustable

Backrest: 8cm Adjustable seat pan

3 unit Steel cabinet 1 w/ 4 drawers color black

dimensions: L=90x W=45x H=130cm

Created by

Annabelle Quinto Madrigal

Date Created

26/04/2024

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

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Email: universitypresident@minsu.edu.ph

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



REQUEST FOR QUOTATION

| Supply and Delive | ry of Semi-Expendable Furniture 8 | Fixtures for MIS and DRRM | Offices at MinSU | Bongabong Campus |
|-------------------|-----------------------------------|---------------------------|------------------|------------------|
|-------------------|-----------------------------------|---------------------------|------------------|------------------|

PR No.: 2024-054

2024-81 RFQ No. ABC Amount: Php57,260.00

: IRAYA LIFE ENTERPRISES BULLSAN CALAPAN CITY Company Name

Address : 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

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 | units | Office table | 2 | 4696- | 13,392-1 |
| | | w/ 4 drawers & lock | | | |
| | | L=55"xW27.5"xH30.25 | | | |
| 2 | units | Office Swivel Chair | 5 | 4,000 - | 20,000 - |
| | | Ergonomic Office Chair | | | |
| | | recline 90-120 degree | | | |
| | | Headrest: Adjustable | | | |
| | | Backrest: 8cm Adjustable seat pan | | | |
| 3 | unit | Steel cabinet | 1 | 22,600- | 22,600 -/ |
| | | w/ 4 drawers | | | |
| | | color black Available Brige + light Gray | | | |
| | | dimensions: L=90x W=45x H=130cm ปกปห | | | IT and D |
| XV | XVXVXVXVX | /xvxvxvxvxvxvxvxvxvxvxvxvxvxvxvxvxvxvxv | XVXVXVXV | xvx | 00, 192 |
| | | | TOTAL | 96 | |

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

MAMA JOWNED (. MENDOLA Supplier's Signature over Printed Name 100-221-678-000W TIN No. of Establishment 09778041725

05.02.2024

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 <u>05-Jul-2019</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 **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 <u>23rd</u> day of <u>August 2023</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: 201907-34627-09366855 Amended Date as of March 29, 2024 11:55 am

List of Eligibility Documents

IRAYA LIFE ENTERPRISES

Bulusan Calapan,

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

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



Republic of the Philippines CITY OF CALAPAN

OFFICE OF THE CITY MAYOR

BUSINESS PER

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.

5.287.50

| NAME OF BUSINESS | BUSINESS I.D. 0170000049 | МС | Annually LOCATION OF | 01/12/2 BUSINESS | | KIND OF B | | R |
|---|-----------------------------|------|---|---------------------|--|--|-------------|--|
| BUSINESS TAX MAYOR'S PERMIT MAYORS PERMIT FEE EDUC'L SPECIAL PROGR DRAINAGE MAINTENANCE SANITARY FEE FIRE AND SAFETY INSP MEDICAL FEE ANNUAL INSPECTION FEE BUSINESS STICKER SITE INSPECTION FEE OCCUPATIONAL FEE TAX CLEARANCE AAP.&RENEWAL OF BUS.FEE | TAXE | BASE | 2,687.50 1,650.00 1,000.00 100.00 200.00 250.00 100.00 200.00 300.00 50.00 220.00 30.00 50.00 | 0.00 | 100.00 1,650.00 1,000 200.00 300.00 50.00 220.00 30.00 50.00 | PERIOD | Payment for | , 2024 ermit, together half at all times or public view ithin the place 3. 1231397 |
| ENCODER | TOTALS | | | ! | 5,287.50 | A STATE OF THE STA | DDOVED DV. | |

ASSESSMENT REVIEWED BY:

RECOMMENDING APPROVAL:

EDUARD L. REYES

Licensing/Officer IV

Officer In-charge of the Permits and License Section

Office of the 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.



BIR FORM
2303
REVISED: APRIL 2019

REPUBLIKA NG PILIPINAS KAGAWARAN NG PANANALAPI KAWANIHAN NG RENTAS INTERNAS

REVENUE REGION NO. 09A - CABAMIRO (CAVITE-BATANGAS-MINDORO-ROME 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 | | ME OF TAXPAYER IENDOZA, MARIA SOCORRO C | TIN ISSUANCE DATE December 7, 1999 | | | |
|--|---|---|---------------------------------------|--------|--|--|
| REGISTERING OFFICE | Х | Head Office | | 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. |

2303

REPUBLIKA NG PILIPINAS KAGAWARAN NG PANANALAPI KAWANIHAN NG RENTAS INTERNAS

REVISED: APRIL 2019

REVENUE REGION NO. 09A - CABA<mark>MIRO (CAVITE</mark>-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 | | ME OF TAXPAYER IENDOZA, MARIA SOCORRO C | ASALLA | TIN ISSUANCE DATE December 7, 1999 |
|--|--------|---|-----------|------------------------------------|
| REGISTERING OFFICE | X | Head Office | Branch | 1 |
| REGISTERED ADDRESS SITIO PROPER 3, BULUSAN 8 | 5200 (| CITY OF CALAPAN (CAPITAL) C | RIENTAL N | MINDORO PHILIPPINES |

| BUSINESS INFORMA | ATION DETAILS | | |
|------------------------|--|-----------|-------------------|
| 300,11200 1111 0111111 | | 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 | Timery | |
| (PSIC) | 47529-RETAIL SALE OF CONSTRUCTION SUPPLIES, N.E.C. | Secondary | |
| Line of Business | RETAIL SALE OF OTHER HOUSEHOLD EQUIPMENT IN SPECIALIZED STORES | Gecondary | |
| (PSIC) | 47412-RETAIL SALE OF COMPUTER PERIPHERAL EQUIPMENT | Secondary | |
| Line of Business | RETAIL SALE OF COMPUTER PERIPHERAL EQUIPMENT | Occordary | |
| (PSIC) | 47631-RETAIL SALE OF SPORTING GOODS AND ATHLETIC SUPPLIES | Secondary | |
| Line of Business | RETAIL SALE OF SPORTING GOODS AND ATHLETIC SUPPLIES | Gecondary | |
| (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. | Gecondary | |
| (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 | | |

2303

REPUBLIKA NG PILIPINAS KAGAWARAN NG PANANALAPI KAWANIHAN NG RENTAS INTERNAS

REVISED: APRIL 2019

REVENUE REGION NO. 09A - CABA<mark>MIRO (CAVITE</mark>-BATANGAS-MINDORO-ROMBLON)
REVENUE DISTRICT OFFICE NO. 063 - CALAPAN, ORIENTAL MINDORO

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

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| TIN & BRANCH CODE 160-221-678-00000 | | ME OF TAXPAYER ENDOZA, MARIA SOCORRO (| CASALLA | TIN ISSUANCE DATE December 7, 1999 |
|--|----------|--|----------|------------------------------------|
| REGISTERING OFFICE | Х | Head Office | Branc | h |
| REGISTERED ADDRESS SITIO PROPER 3. BULUSAN | 1 5200 C | 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.

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

RDO DRY SEAL

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

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

PRINT & BACK TO HOME





Republic of the Philippines Department of Finance Bureau of Internal Revenue

For BIR Use Only

BIR Form No 1701

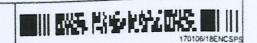
Annual Income Tax Return
Individuals (including MIXED Income Earner), Estates and Trusts
required information in CAPITAL LETTERS using REACK risk. Mark all psycholic boxes with an 'X' Two



| January 2018 (ENCS) Page 1 | copies MUST be filed with the B | iff and one held by the | 70 x 5 (10) | | |
|---|--|---|---|--|--|
| | | | | 3 Short Period | Return? Yes * No |
| 1 For the year 12 / 20 23 | | les No | Townsies/Eller | | |
| | PART I - Backgroun | - 000 | Taxpayerinti | 5 RDO Code C | 063 |
| 4 Taxpayer Identification Number (TIN) 16 | 0 - 221 - 678 | - 000 | | | The second of th |
| 6 Taxpayer Type | Single Proprietor | Professional | Estate Trus | et Compensation | Earner. |
| 7 Alphanumeric Tax : 8012 Business Income Code (ATC) : Graduated IT Rates | 9014 Income from B Profession - Graduated IV Gradu Rates Gradu | 013 Mixed Income : ated IT Rates Com | 8011 opensation Income Inco | IID 15 Business me 8% (T Rate Profe | 8017 Income from 8016 Used soon - 8% If Rate Income - 8% If Rate |
| 8 Taxpayer's Name (Lat) Name First Name Middle | Name for Individual / ESTATE OF | F (First Name, Middle N | ame Last Name] / TR | UST FAO (First Name | e, Middle Name, Last Name) |
| MUNICIPAL MARIA SOCORRO CASALLA | | | | | |
| 9 Registered Address (Indicate complete address | If the registered address is different | from the current address | , go to the RDO to upd | fate registered address b | y using BIR Form 1905): |
| SITIO PROPER 3, BULUSAN CITY OF CALAP | | | | | |
| | | | 9A Zip Code | 5200 | |
| 10 Date of Birth (MMODAYYY) | 11 Email Address | | | | |
| 09/25/1971 | irayalife fc@yahoo com | | | 144 Enraign Tax | Number (if applicable) |
| 12 Citizenship | 13 Claiming Foreign Tax C | Lredits / | | 14) Greight tex | |
| FILIPINO | Yes " No | | | | |
| 15 Contact Number 15 /Landine/Celiphone No.) | 16 Civil Status (# applicable) | l . | | | |
| 09308147583 | | | | | |
| | Single Married Leg | ally Separated Wido | wer | 18 Filing Status | Joint Filling Separate Filling |
| 17 If marned, spouse has income? | Yes | No | | | |
| 19 Income EXEMPT from Income Tax? | Yes " No | | | PREFERENTIAL RAT | |
| Iff yes, fill out also consolidation of ALL activities pe | The state of the s | | | ALL activities per Tax | |
| | ed Rates (Choose Method of 8% : | n lieu of Graduated Rate | s under Sec. 24(A) and | Percentage Tax under S | Sec. 116 of NRC (available if gross sales/ |
| Deduction in t | em 21A) receipts a | | | hree million pesos (P3M) | |
| 21A Method of Deduction (chaose one) | Remized Deduction (Sec. 34(A J) NI | RC! Optional Standa | and Deduction (OSD) [4 | 0% of Gross Sales/Recei | pts/Revenues/Fees (Sec 34(L) NPC) |
| | PART | II - Total Tax Paya | ble | | |
| | iculars | | A. Taxpaye | | B. Spouse |
| 22 Tax Due (From Part VI Item 51 | | | | 44 936 41 550 | 0 |
| 23 Less Total Tax Credits / Payments (From 24 Tax Payable/(Overpayment) (Item 22 Les | | | | 3.386 | 0 |
| 25 Less Portion of Tax Payable Allowed for | | or before | | 0 | 0 |
| October 15 (50% or less of Item 22) | | | | | 0 |
| 26 Amount of Tax Payable/(Overpayment) (Add Penalties 27 Interest | Item 24 Less Item 25) | | | 3.386 | 0 |
| 28 Surcharge | | 1 1 1 1 1 | | 0 | |
| 29 Compromise | | | - 11 - 12 - 12 - 12 - 12 - 12 - 12 - 12 | 0 | 0 |
| 30 Total Penalties (Sum of Items 27 to 29) | | | -4124 TON | . 0 | 0 |
| 31 Total Amount Payable/(Overpayment) | | | Samuel Control of the Control | 3 386 | 3.386 |
| 32 Aggregate Amount Payable/(Overpaya | | revocable) | | | 3 300 |
| To be ref | | a a menant see | he carried over as tax of | redit for next year/quarte | |
| | | | | | |
| I declare under the penalties of penjury that this re the provisions of the National internal Revenue Code a "Data Privacy Act of 2012 (R.A. No. 10173) for legitimat | s amended and the regulations issued | dunder authority thereof | Further I give my cons | sent to the processing of | d belief are true and correct, pursuant to my information as contemplated unider the |
| | | | | | Number of Attachments 0 |
| Printed Nat | me and Signature of Taxpayer/Aut | honzed Representativ | e | and the second second second | |
| | PART | III - Details of Payn | nent | | |
| Particulars | Drawee Bank/Agency | Numb | er | Date (MM/DD/ YYYY) | Amount |
| 34 Cash/Bank Debit Memo | | | | | |
| 35 Cherk | 1 | | | | |
| 36 Tax Diebit Memo 37 Others (Specify Below) | L | | | | |
| | | | 1 | | |
| Machine Validation / Revenue Official Receipt De | etails (if not filed with an Authorized | d Agent Bank) | | | g Office/AAB and Date of Receipt ature/Bank Teller's initial) |
| | | | | | |

1701 January 2018 (ENCS)

Annual Income Tax Return Individuals (including MIXED Income Earner), Estates and Trusts



| Page 2 | |
|---|--|
| TIN Tax Filer's Last Name | |
| 160 - 221 - 678 - 000 MENDOZA | |
| PART IV - Background Information of Spouse 1 Spouse's Taxpayer Identification Number / / / 2 RDO Code | and the state of t |
| 3 Filer's Spouse Type Single Proprietor Professional Compensation Earner | |
| Alphanumeric Tax II012 Business II014 Income from II013 Mixed II011 II015 Business II017 Income from II013 Mixed II Compensation Income - 8% IT Profession - 8% IT Profession - 8% IT | H016 Mixed |
| | Rate |
| 3 Spouse 5 (Value Last Warre 1933 Name Andre Name) | |
| S Contact Number 7 Citizenship | |
| S 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? (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)] | Yes No |
| 12 Tax Rate* (choose one) Graduated Rates (Choose 8% in lieu of Graduated Rates under Sec. 24(A) and Percentage Tax under Sec. 116 of Method of Deduction in Item 12A) If gross sales/receipts and other non-operating income do not exceed Three million pesos | f NIRC (available (P3M)) |
| 12A Method of Deduction (choose one) Itemized Deduction [Sec. 34(A-J), Optional Standard Deduction (OSD) [40% of Gross Sales/Receipts NIRC] | |
| PART V - Computation of Tax | |
| Schedule 1 – Gross Compensation Income and Tax Withheld Annie Asching Street's if necessary) | |
| On Berns 1 and 2 enter the required information for each of vosit employer's and mark (X) at effect the information is for the Taynavar or the Spousa. On item 3A enter the Total Gross Cor | pensation and |
| Intel Tax Withheld for the Taxpayer and on tem 3B for the Spouse (DO NOT enter Centavos or Less drop down, 50 or more round up) a Name of Employer | |
| Taxpayer | Marine, and Additional parties and sequences (Confess |
| Spouse b. Employer's TN | |
| 2 Taxpayer | The state of the s |
| Spouse b. Employers TIN | (According Constitution Constit |
| (Continuation of Table Above) c. Compansation Income d. Tax W | atheid |
| C Compensation Income d Tax W | 0 |
| 2 | .0 |
| 3A Gross Compensation Income and Total Tay Withhold for TAYPAYER (7- Day Withhold for TAYPAYER) | 0 |
| 18 Gross Compensation Income and Total Tax Withheld for SPOUSE (To Part V Schedule 2 Item 48 and Part VII Item 58) | 0 |
| Schedule 2 - Taxable Compensation Income (DO NOT enter Centavos; 49 Centavos or Less drop down; 50 or mor | e round up) |
| Particulars A Taxpayer/Filler B. Spo | and greaters and the company of the control of the great of the production of the control of the |
| 4 Gross Compensation Income (From Part V Schedule 1 Item 3Ac/38c) 0: | 0 |
| 5 Less Non-Taxable / Exempt Compensation 0 | 0 |
| 6 Taxable Compensation Income (rem 4 Less item 5) | 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 |) |
| 3.A-For Graduated Income Tax Rates 8 Sales Revenues Receipts/Fees 3.756.213 | 0 |
| 9 Less Sales Returns, Allowances and Discounts | . 0 |
| 10 Net Sales Revenues Receipts/Fees (item 8 Less (lem 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) 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) OR 305,392 | 0 |
| 17 Optional Standard Deduction (OSD) (40% of Item 10) | 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 |
| 20 0 21 Amount Received/Share in Income by a Partner from General Professional Partnership (GPP) 0 | 0 |
| 21 Amount Received/Share in Income by a Partner from General Professional Partnership (GPP) 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 | Charles of Laboratory |
| | D |
| 24 Total Taxable Income – Compensation and Business (Sum of Items 6 and 23) 512,179 | 0 |

BIR Form No 1701

Annual Income Tax Return

Individuals (including MIXED Income Earner), Estates and Trusts



January 2018 (ENCS) Page 3 Taxpayer Filer's Last Name TIN 678 . 000 160 221 AM NOOZA

opp NOT onles Carminas 49 Centinos as Leas da 3.8 - For 8% Flat Income Tax Rate B) Spouse A) Taxpayer/Filer 0 26 Sales Revenues Receipts/Fees (not of sales returns allowers as and decoupts)

Add Other Non-Operating Income (spring below) 27 0 0 28 Total Income (Sum of Rems 26 and 27) 29 Less. Allowable reduction from gross sales/receipts and other non-operating income of purely self-employed 0 0 individuals and/or professionals in the amount of P250,000 (not applicable if with compensation 0 0 30 Texable Income/Loss) (flom 28 Loss flom 29) 0 0 31 Tax Due-Business Income (Item 30's 8% Flat Income Yex Rate) 32 Total Tax Due-Compensation and Business Income (under fall rate) [Sum or lights 7 are 31] [Tellos fill (1 (em. I)] 0 0 Schedule 4 - Ordinary Allowable Remized Deductions (affach additional sheet/s, if necessary) 0 0 0 0 2 Bad Debts 0 3 Charitable and Other Contributions 0 0 4 Deptetion 0 0 5 Depreciation 21,850 0 0 6 Enterlainment, Amusiement and Recreation 0 7 Frange Benefits 0 0 8 Interest 0 0 9 Losses 0 0 10 Pension Trusts 0 0 11 Remial 0 0 12 Research and Development 0 0 104 000

13 Salaries, Wages and Allowances 14 SSS, GSIS Philhealth HDNF and Other Contributions 25 359 0 15 Taxes and Licenses 33 331 0 16 Transportation and Travel 0 35,930 17 Others (Deductions Subject to Withholding Tax and Other Expenses) [specify below Add additional sheet(s) | If necessary] 0 a Jan4bhal and Messengeral Services 0 0 b Professional Fees 12,000 0 C Security Services 0 0 d SEE FINANCIAL STATELIFNTS 72 922 0 18 Total Ordinary Allowable demized Deductions (Sum of Items 1 to 17d) (To Part V, Schedule 3 A Item 13)

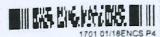
Schedule 5 - Special Allowable Itemized Deductions (attach additional sheet/s, if necessary)

Amount 5.A - Taxpayer/Filer Description Legal Basis 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 0 5.B - Spouse Amount 4 0 5 0 6 Total Special Allowable Itemized Deductions-Spouse (Sum of hems 4 and 5) (To Part v Schedule 3 A Item 148) 0

Schedule 6 - Computation of Net Operating Loss Carry Over NOLCO 6.A - Computation of NOLCO B. Spouse Description A. Taxpayer/Filer 1 Grass Income 0 0 0 2 Less Ordinary Allowable temized Deductions 0 0 3 Net Operating Loss (Nem 1 Leas Rem 2) (To Schedule 6 A 1 Item 7A Wor Schedule 6 A 2 Item 12A) 0

6.A.1 - Taxpayer/Filer's Detailed Computation of Available NOLCO

| Net Operating Loss | | perating Loss | B. NOLCO Applied | | D. NOLCO Applied | E. Net Operating Loss | | |
|--------------------|-----------------------|-------------------------|----------------------------------|------------------------|------------------|--|--|--|
| Ye | | A. Amount | Previous Year/s | C. NOLCO Expired | Current Year | (Unapplied) {(E)= A - (B+C+D)} | | |
| 4 | 0 | 0 | . 0 | 0 | 0 | 0 | | |
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | | |
| 6 | 0 | 0 | 0 | 0 | 0 | C | | |
| 7 | Section of the second | 0 | 0 | 0 | 0 | Commence of the Commence of th | | |
| 8 | otal NOL | CO - Taxpayer/Filer (Se | im of Items 4D to 7D) (To Part v | Schedule 3 A Item 15A) | 0 | | | |



| 1/U1 January 2018 (ENCS) | Annual Inco | ome Tax Retu Income Earner), Estate | | 1701 01/18ENCS P4 |
|--|--|---|--|--|
| Page 4 TIN 160 - 221 - | | nayerTiter's Lest Name | nde entre filmen en e | |
| (Continuation of Schedule | 6) | | | e e e e e e e e e e e e e e e e e e e |
| 6.A.2 - Spouse's Detailed C | computation of Available NOLC | | | |
| Net Operating Loss Year Incurred A Amou | B NOLCO Applied of Previous Year/s | C. NOLCO Expired | D. NOLCO Applied Current Year | E. Net Operating Loss (Unapplied (E)= A - (B+C+D)) |
| 9 | | | | |
| 11 | elitteratur ari a a garaji ina garajinan kanalan ilimban parajili jalijahan ja a a a a a a a a a a a a a a a a Sana a a a a a a a a a a a a a a a a a a | | ng gynnam na haft an thaffar than tha thair deil an ta' ann, ann taith tha ag leith an ann an taobh ain. Ail ann gan ta chuig tha ta guill an thair ann an Lanting fair (an la fhair) an ta fha ann ann an taonach ain | A construction of the control of the |
| 13 Total NOLCO - Spouse | 0 0 0 0 120) (To Part V Sch | 0 land de 7 A (torn 158) | 0 | |
| | | 1 - Summary of Income Tax I |)ue | |
| 1 Regular Rate Income Tax Due | B (From Part V, Either Item 25 or Item 3 | 121 | 44 | 936 0 |
| 2 Special Rate Income Tax Due | | | | 0 0 |
| 0 10.0 | nent Agency if remitted directly to the i | | - | 0 0 |
| 5 Total Income Tax Due (Sum of | Due Share of National Govt. (Item 21.) | ess nem sj | 44 | 936 0 |
| | | F C du B | | |
| 1 Phor Year's Excess Credits | PARTVIL | Tax Credits/Payments (attach | preery | 0 0 |
| 2 Tax Payments for the First The | ree (3) Quarters | re namen kangan dipan mengan pada gapi dangan kangan dan panyan melikapin menangkan anangan menanan salah mel | | 0 0 |
| 3. Creditable Tax Withheld for the | The second secon | | 23 | 335 0 |
| | IR Form No 2307 for the 4th Quarter | nn a fhaill (1918 i ceann a fha ann mainte ann ann a mar ann ann an naoigt i deach ach an aidir feacail fheach | 18 | 215 0 |
| | IR Form No 2316 (From Pan V Schedule | † Rem 3Ad/3Bd) | | 0 0 |
| 7 Foreign Tax Credits, if applica | Fried, if this is an Amended Return | | | 0 0 |
| 8 Special Tax Credits, if applica | Charles and the Control of the Contr | | | 0 0 |
| Other Tax Cradits/Payments, UN 4 | | | | |
| | | an personan anakan hali amangkan kilan kelaji dina mengupun penjunggan pengunan dari angala. Saman kelaji dina kelaji dina mengunan kelaji dina penjunggan penjunggan kelaji dina kelaji dina mengunan menga | | 0 0 |
| 10 Total Tax Credits Payments | (Sum of items 1 to 9) (To Part II Item 2 | 3) | 41. | 550 0 |
| Van A. C | PA | RT VIII - Tax Relief Availment | | |
| VIII.A - Special Rate 1 Regular Income Tax Otherwis | ve Due (Part X Nem 168 & for Nem 16F X app | licable requiar income lax rate) | T | 0 0 |
| 2 Tax Relief on Special Allowab | ole Itemized Deductions (Part X Item 78 a | nd/or item 7F X applicable regular | | 0 0 |
| 3 Sub-Total - Tax Relief (Sum (| of Items 1 and 2) | | 1 | 0 0 |
| The state of the s | Part X item 178 and/or Item 17F) | | | 0 0 |
| 5 Tax Relief Availment Before S | Special Tax Credit (Item 3 Less Item 4) | | | 0 0 |
| 6 Add Special Tax Credit if an | | | 1 | 0 0 |
| 7 Total Tax Relief Availment- Si | PECIAL (Sum of Items 5 and 6) | | | 0 0 |
| VIII.8 - Exempt | se Due (Part X Rom 16A &/or 16E X applicab | | 7 | 0 0 |
| The same of the sa | ble Itemized Deductions (Pan X item 7A a | | | 0 0 |
| 10 Total Tax Relief Availment. | EXEMPT (Sum of Items 8 and 9) | | | 0 0 |
| | | | | |
| PAR | T IX – Reconciliation of Net Income per Particulars | r Books Against taxable inco | A) Taxpayer/Filer | |
| 1 Net Income/(Loss) per Books | | | 51 | 2,179 0 |
| Add Non-Deductible Expenses/T | axable Other Income | | | |
| 2 | or and the many differential to a "selection". (Independent of the part of the selection of | major mangano patoni, pato "apinto tro deneg transplantencia e subsecuentencia plante | Andrew Comment Comments of the Comment of the Comme | |
| 3 | | | | |
| | | | | |
| 5 Total (Sum of Items 1 to 4) | | | 51 | 2,179 0 |
| Less A) Non-Taxable Income an | d income Subjected to Final Tax | | | |
| 6 | | | | |
| 7 | | | | |
| B) Special/Other Allowable | Deductions | | | |
| 8 | | | | |
| 9 | yer ye v v | said a single s | | |
| 10 Total (Sum of Items 6 to 9) | A Marie Edward Co | | | 0 0 |
| 11 Net Taxable Income/(Los | (item 5 Less item 10) | | 51 | 2,179 |

| Tax Due is | | | | | | |
|-------------------------------------|--|--|--|--|--|--|
| 4. | | | | | | |
| 20% of the excess over P 250 000 | | | | | | |
| P 30 000 + 25% of the excess over P | | | | | | |
| | | | | | | |

| TABLE 2 - Tax Rates (effective Jan | uary 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 |

1701 January 2018 (EMCS) Page 1m Taxpayer Identification Number (TIN)

Annual Income Return Consolidation of ALL Activities per Tax Regime

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| (Accomplish only if with MULTIPLE Tax Regimes) | 1 | · 日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日 |
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| | to the section of the | |
| V o | A. Only one activity/project under EXEMP1 and/or SPECIAL Tax Regimes, ill-out the appreases counties below. B. Two or more activities/projects under EXEMP1 and/or SPECIAL Tax Regimes, accomplish Part XI-Mandatory Attachments per activity and reflect. | - |

Part X - CONSOLIDATED COMPUTATION
BY TAX REGIME
Instructions (mark exprepriate box)

| SCHEDULE A - Basis of Tax Relief | | TAXPAYER | - | | 1 | SPOUSE | SE | C Complete |
|---|--|--|--|--|---|--|--|--|
| Particulars | A. Exempt | B. Special | | C. Regular | D. Exempt | E. Special | Cial | F. Regular |
| 1 Investment Promotion Agency (IPA)/Implementing Government Entity | | | | | | | | |
| 2 Legal Basis 3 Benefated Actuits Decream (Dec. No.) | - | | | and the same of th | | - | | And the second s |
| 4 Special Tay Rate | | | % 0 | and the special specia | whether profession of profession and compared | | 3º 0 | energene en |
| 5 Effectivity Date of Tax Relief/Exemption From (MM/DD/ | | | | | | | | |
| 6 Expiration Date of Tax Relief/Exemption To (MM/DD/ | | to the control of the | | | | | | |
| SCHEDULE B - Computation of Income Tax | | | | | эмоа) | (DONOT enter Centavos, 49 Centavos or Less drop down; 50 or more round | embros or Less drop o | lowns; 50 or more round up. |
| | | TAXPAYER/FILER | VFILER | | | SPO | SPOUSE | |
| Description | 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/Recepts Fees (EXEMPTSPECAL: Il letter B of instructions above is marked from All of Part XI Schedule B Item 1A/1B) (REGULAR: From Part V Schedule 3.4 Item 8A@B) | 0 | 0 | 3,756,213 | 3,756,213 | 0 | 0 | | 0 |
| 2 Less Sales Returns, Alowances and Discounts (EXEMPT) SPECIAL: If letter Biol instructions above is marked, from All of Part XI Schedube Bitem 2A/28J (REGULAR: From Part V Schedube 3A from 9A/28J) | 0 | 0 | 0 | 0 | 0 | 0 | | 0 0 |
| 3 Net Sates/Revenues/Receipts/Fees (Item 1 Less Item 2) | 0 | 0 | 3,756,213 | 3,756,213 | 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/48) (REGULAR: From Part V Schedule 3.4 Item 11A/118) | 0 | 0 | 2,938,642 | 2,938,642 | 0 | 0 | | 0 |
| 5 Gross Income/(Loss) from Operation (Nem 3 Less Nem 4) | 0 | 0 | 817,571 | 817,571 | 0 | 0 | | 0 |
| Less Deductions Allowable under Existing Laws | | | | | | | | |
| 6 Ordenary Alsovable Itemized Deductions (EXEMPT/SPECAL: ffrom Schedule C Item 19) and/or (I letter B of instruction above is marked, from all of Part XI Schedule B Item 6A/69) (REGULAR: From Part V Schedule 3.4 Item 33A/139) | 0 | 0 | 305,392 | 305,392 | 0 | 0 | | 0 |
| 7 Special Allowable Deductions (EXEMPT/SPECIAL: (From Schedulo D Item) 8 and/or (I letter B of instruction above is marked, Schedule D Item 74/TB) (REGULAR: From Part V Schedule B Item 74/TB) (REGULAR: From Part V Schedule 3.4 (tem 144/14B) | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| 8 Allowance for Net Operating Loss Carry Over (NOLCO) From Part V Sched 3.4 Item 15A/158) | | | 0 | 0 | | | | 0 |
| 9 Total Allowable Remized Deductions (Sum of Items 6 to 8) | 0 | 0 | 305.392 | 305,392 | 0 | 0 | | 0 0 |
| OR | | | | | A LANGE TO SERVICE AND ADDRESS OF THE PARTY | | | |
| 10 Optional Standard Deduction (OSD) (40% of flem 3) | | | 0 | 0 | | | | 0 |
| Net income/(Loss) (**Illemized** flam 5 Less flam 9. **ILOSD: flam 3 Less flam 10) | 0 | 0 | 512,179 | 512,179 | 0 | 0 | | 0 0 |
| Add. Other Non-Operating income (specify below) (EXEMPTSPECIAL: If letter B of instructions above is marked, from all of Part XI Schedule B frems 10A/10B and 11A/11B) (REGULAR: From Part V Schedule 3.4 frams 13A/13B and 20A/20B) | L. If letter B of instruction | ins above is marked, fi | om all of Part XI Sc | hedule B Items 10A/ | 10B and 11A/11B) (RI | GULAR: From Part | V Schedule 3.A flex | ms 19A/198 and 20A/ |
| 12 | 0 | 0 | 0 | 0 | | 0 | | 0 0 |
| 13 | 0 | 0 | 0 | 0 | 0 | | | |
| 14 Amount Received/Share in Income by a Partner from a GPP (From Part V Schedule 3.4 Hem 214/218) | | | 0 | 0 | | | | 0 0 |
| 15 Total Other Non-Operating Income (Sum of Items 12 to 14) | 0 | 0 | 0 | 0 | 0 | 0 | | |
| 16 Total Taxable Income/(Loss) (Sum of Items 11 to 15) | | 0 | 512,179 | 512,179 | | | | 0 0 |
| 17 1AX DUE - (Exempt(flen 16A/16E x 0%) and/ox (From all of Part XX Schedule B them 15), [Special: (flem 5B2F X applicable income tax and and of From all of Part XI schedule B flem 15), Regular: (From Part V flem 31) | 0 | 0 | 44,936 | 44,936 | 0 | 0 | | 0 0 |
| Programme and the contract of | The second secon | A STATE OF THE PARTY OF THE PAR | Carter Print Spring Spr | Commence of the Contract of th | Assembly representational and an article | description of the second second second | Accompany of the Contract of t | and a constitution of the same of the same of |

1701 January 2018 (ENCS) Page 2m

Annual Income Return

Consolidation of ALL Activities per Tax Regime



Epayer Identification Number (TIN)

Tax Filer's Last Name

MENDOZA

Tax Filer's Last Name

| Schedule C - Ordinary Allowable Itemized Deductions (attach addition | al sheet/s if necessary) | | (DO NOT enter Centavos, 49 Centavo | os or Lesz drap down; 50 or more round up: |
|---|-------------------------------|-------------------|------------------------------------|---|
| | TAXPAYE | R/FIL FR | SPOUS | SE . |
| Description | A. Exempt | B. Special | C. Exempt | D. Special |
| 1 Amortizations | 0 | 0 | 0 | 0 |
| 2 Bad Debts | 0 | 0 | 0 | 0 |
| 3 Chantable and Other Contributions | 0 1 | 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 Salanes 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) [Specif | v below. Add additional sheet | (s) if necessary] | | |
| a Jandonal and Messengenal Services | 0 | 0 | 0 | 0 |
| b Professional Fees | 0 | 0 | 0 | 0 |
| c Security Services | 0 | 0 | 0 | 0 |
| d. | 0 | | 0 | 0 |
| 18 Total Ordinary Allowable Bernized Deductions (Sum of Berns 1 to 17d) (To Part X Schedule B Item 6) | 0 | 0 | 0 | 0 |

| D | | Taxpayer | Filer | Spous | 0 | |
|--|------------------------------|-----------|------------|-----------|------------|--|
| Description | Legal Basis | A. Exempt | B. Special | C. Exempt | D. Special | |
| *************************************** | | 0 | . 0 | 0 | | |
| | | 0 | 0 | 0 | | |
| | | 0 | 0 | 0 | | |
| | | 0 | 0 | 0 | | |
| Total Special Allowable Itemiz to 4) (To Part X Schedule B Item | red Deductions (Sum of Items | 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 CERTIFICATION FEE OF P100 WAS PAID ON JUNE 14, 2023 UNDER EFPS PAYMENT TRANSACTION NO. 235204712. ANY SALES/TRANSFER OF REAL PROPERTIES.

ERASURE MADE ON THIS TCC SHALL RENDER IT NULL AND VOID.



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

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

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

APPROVED BUDGET FOR THE CONTRACT (ABC) Supply and Delivery of Semi-Expendable Furniture & Fixtures for MIS and DRRM Offices at MinSU Bongabong Campus Labasan, Bongabong, Oriental Mindoro Project Name and Location

Stations: Mindoro State University

| RENJELIT Nember | | | | | | ω | | | | | 2 | | | 1 | (1) | | | | ITEM NO. | | | Length: |
|---|-------------|--|---------------------------------|-------------|--------------|---------------|-----------------------------------|----------------------|-----------------------|------------------------|---------------------|---------------------|---------------------|--------------|----------------|------|-------|----------------------|-------------------|------------------------|--------------------|--------------------|
| RENIELITO CARICO Member, BAC Secretariat | GRAND TOTAL | ΧΑ | dimensions: L=90x W=45x H=130cm | color black | w/ 4 drawers | Steel cabinet | Backrest: 8cm Adjustable seat pan | Headrest: Adjustable | recline 90-120 degree | Ergonomic Office Chair | Office Swivel Chair | L=55"xW27.5"xH30.25 | w/ 4 drawers & lock | Office table | (2) | | | | DESCRIPTION | | | |
| Submitted by Engr | | | | | | 1 | | | | | 5 | | | 2 | (3) | | | | QUANTITY | | | |
| | | | | | | unit | | | | | units | | | units | (4) | | | | UNIT | | | |
| MARK LESTER A. MAGPANTAY Head, BAC Secretariat | | | | | | 14,760.00 | | | | | 4,500.00 | | | 10,000.00 | (5) | | | | PRICE | CHRENT MARKET | | |
| ANTAY | 57,260.00 | - | | | | 14,760.00 | , | - | , | | 22,500.00 | | | 20,000.00 | (6) | | | | TOTAL COST | | | |
| NEMESIO H. DAVALOS, Ph.D. Chairperson, BAC | - | | | | | | | | | | | | | | (7) | | | | DUTIES APPLICABLE | VAT OTHER TAXES AND/OR | | |
| os, <i>Ph.D.</i> | | | | | | | | | | | | | | | (8) | | | | INSURANCE | FREIGHT & | | |
| | | | | | | | | | | | | | | | (9) | | | - | COSTS | OTHER | | |
| Approved (CHRISTIAI OIC- Office | _ | | | | | | | | | | | | | | (10) | | % | INFLATION, CURRRENCY | % | INFLATION, CURRRENCY | OTHER COST FACTORS | Contract Duration: |
| N ANTHO | | | | | | | | | | | | | | | (5)X(9) | (11) | VALUE | URRRENCY | VALUE | URRRENCY | FACTORS | ration: |
| Approved OOO S CHRISTIAN ANTHONY C. AGUTAYA, Ph.D. OIC- Office of the University President | | | | | | | | | | | | | | | (10%[(5)+(10)] | (12) | | | TOTAL COST | | | |
| YA, <i>Ph.D</i> . ident | | | | | | | | | | | | | | | (11) / (3) | (13) | | | UNIT COST | | | |



Republic of the Philippines Republic of the Philippines MINDORO STATE UNIVERSITY Bongabong Campus



PURCHASE REQUEST

Fund Cluster:

| Office/Sec | tion : | PR No.: 2024-054 Responsibility Center Code : | Date: A | April 3, 2024 | | | |
|--------------------|--------|---|-----------|---------------------|-------------------------------------|--|--|
| Stock/ Property | Unit | Item Description | Unit Cost | Total Cost | | | |
| | units | Office table | 2 | 10,000.00 | 20,000.00 | | |
| | | *w/4 drawers & lock | | | | | |
| | | *L=55" x W27.5" x H30.25" | | | | | |
| | units | office swivel chair | 5 | 4,500.00 | 22,500.00 | | |
| | | * Ergonomic Office chair | | | | | |
| | | * Recline: 90-120 degree | | | | | |
| | | * Headrest: Adjustable | | | | | |
| 1 1975 - 1975 | | * Backrest: 8cm Adjustable seat pan | | | | | |
| | unit | steel cabinet | 1 | 14,760.00 | 14,760.00 | | |
| | | * w/ 4 drawers | | | - | | |
| | | * color black | | | - | | |
| | | * Dimensions: L=90 x W=45 x H=130cm | | | - | | |
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| | | | | | | | |
| | | GRAND TOTAL | | | 57,260.00 | | |
| Purpose: | Semi-e | xpendabele- Furniture & fixture (MIS | & DRR | M) 101 | 5-14-7 -200 -04-419 D2032226w | | |
| | Rec | uested by: Recommending Appl | roval: | Certified Allotment | | | |
| Signature : | | net to | | | moder | | |
| | | M. MELENDREX CIEDELLE P. SALAZA | | | N P. ROXAS | | |
| Designation : | DR | RM Coor. Campus Executive D | irector | Budgle | et Officer III | | |
| Signature : | | Approved by: | 0 | | | | |
| Printed Name | | CHRISTIAN ANTHONY C. A | GUTAY | A. Ph.D. | | | |
| Designation: | | OIC -University Pr | | | | | |

| | FURNITURE AND FIXTURES EXI | PENSES | | |
|-------------------------------------|----------------------------|--------|-----------|-----------|
| SEMI-EXPENDABLE FURNITO EXPENSES (M | | | | |
| office table | unit | 2 | 10,000.00 | 20,000.00 |
| office swivel chair | unit | 5 | 4,500.00 | 22,500.00 |
| steel cabinet | unit | 1 | 14,760.00 | 14,760.00 |
| | | | Sub-total | 57,260.00 |
| Good Lumber 2x2x12 | pcs | 10 | 580.00 | 5,800.00 |
| Good Lumber 2x3x10 | pes | 5 | 595.00 | 2,975.00 |
| Marine plywood 3/4 | pcs | 4 | 2,000.00 | 8,000.00 |
| S x S 1/2 x 1 x 8 | pes | 15 | 95.00 | 1,425.00 |
| Stikwel | liter | 1 | 250.00 | 250.00 |
| Finishing nail 1" | kgs | 1 | 120.00 | 120.00 |
| Finishing nail 2" | kgs | 1 | 120.00 | 120.00 |
| Plastic varnish natural | liters | 3 | 350.00 | 1,050.00 |
| Wood viles | liter | 1 | 350.00 | 350.00 |
| Sand paper #100 | pcs | 5 | 60.00 | 300.00 |
| Paint brush #4 | pcs | 1 | 150.00 | 150.00 |
| Laquer thinner | bottles | 2 | 100.00 | 200.00 |
| | | | Sub-total | 20,740.00 |
| | | | Total | 78,000.00 |

ROOKS

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

PROJECT PROCUREMENT MANAGEMENT PLAN (PPMP)

INIT'; Disaster Risk Reduction and Management Office

777

rams and Activities

| SEMI-EXPENDABLE FURNITURE AND FIXTURES office table office swivel chair steel cabinet unit | A I A | COST | | | | | COLUMN | 2000 | College Manager of the College of th | TA LANGE | | - | - Annie Anni |
|--|--|-----------|-----------|-----|-------|-------|---------|----------|--|----------|-----|-----|--|
| | The state of the s | | AMOUNT | Jan | Feb N | Mar A | Apr May | Jun Ju | Jul Aug | g Sept | Oct | Nov | Dec |
| | | | | | | | | | | | | | |
| shair | | 10,000.00 | 10,000.00 | | | | 200 | 1 | | 1 | | | |
| | 2 | 4,500.00 | 00'000'6 | | | | | | | | | | |
| ALTERNATION OF THE PROPERTY OF | 1 | 14,760,00 | 14,760.00 | | | | | | | - | | | |
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| | The same of the sa | | | | | | | | | | | | |
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| | | | | | | | | | | | | | |
| TOTAL | | | 33,760.00 | | | | | | | | | | |

Recommending Approval:

33,760.00

DGET:

DR. CIEDELLE G. PIOL-SALAZAR Campus Executive Director

JARED M. MELINDRES

Coordinator for Disaster Risk Reduction and Management

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

PROJECT PROCUREMENT MANAGEMENT PLAN (PPMP)

END-USER UNIT: Management Information System

Charged to GAA

| Oobn | recipitational relations | THE PERSON | Auto | macro marks | TOTAL | | | | SC | TEDULE/ | MILEST | ONE OF / | SCHEDULE/ MILESTONE OF ACTIVITIES | S | | | |
|--|--|------------|--------|-------------|-----------|-------|-----|-----|-----|-------------|--------|----------|-----------------------------------|------|-----|-----|-----|
| CODE | GENERAL DESCRIPTION | ONIT | - 5 | ONIT COST | AMOUNT | Jan | Feb | Mar | Apr | Apr May Jun | Jun | Jul | Aug | Sept | Oct | Nov | Dec |
| | SEMI-EXPENDABLE FURNITURE AND FIXTURES | | | | | | | | | | | | | | | | |
| | office table | unit | | 10,000.00 | 10,000,00 | | | | | | | | | | | | |
| | office swivel chair | unit | 3 | 4,500.00 | 13,500.00 | | | | | | | | | | | | |
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| | and desired and desired and the second desired and des | | | | | | | | | | | | | | | | |
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| | TOTAL | | | | 23,500.00 | | | | | | | | 湖 | | | 4. | |
| | | | | | | | | | | | | | | | | | |

23,500.00

TOTAL BUDGET:

Prepared By:

URIEL M. MELENDRES

Coordinator, Management Information System

57,260.00

DR. CIEDELLE G. PIOL-SALAZAR

Recommending Approval:

Campus Executive Director