



**SUPPLY AND DELIVERY OF ICT EQUIPMENT FOR RECORDS OFFICE OF MinSU MAIN CAMPUS**

Name of Project

**BAC Resolution Recommending Approval  
Resolution No. 188, s. 2024**

**WHEREAS**, the Mindoro State University (MinSU), through Bids and Awards Committee (BAC) has advertised in the PhilGEPS and MinSU Website for the second time the Request for Quotation (RFQ) for the project “Supply and Delivery of ICT Equipment for Records Office of MinSU Main Campus” with an Approved Budget for the Contract (ABC) amounting to Fifty Thousand Pesos (Php50,000.00);

**WHEREAS**, in response to the first publication of the project on August 23, 2024; two (2) suppliers were found in the document request list however, no supplier submitted the Request for Quotation (RFQ) thus, declared failure of RFQ;

**WHEREAS**, in response to the second advertisement, four (4) 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
Php50,000.00	Iraya Life Enterprises	Php49,950.00

**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 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 awarding of contract for the “Supply and Delivery of ICT Equipment for Records Office of MinSU Main Campus” amounting to **Forty-Nine Thousand Nine Hundred Fifty Pesos (Php49,950.00)** with official address Bulusan, Calapan City, Oriental Mindoro as the supplier/bidder with Single Calculated Responsive Bid (SCRB);

**RESOLVED**, at MinSU Main Campus, Alcate, Victoria, Oriental Mindoro, this 24<sup>th</sup> day of September, 2024.

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

  
**Engr. MARK LESTER A. MAGPANTAY**  
BAC Vice-Chairperson

  
**ATTY. SHERLYN A. LAYESA**  
BAC Member

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

  
**MELGAR G. FADRIQUELAN**  
BAC Member

Approved/Disapproved

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

Date: \_\_\_\_\_





<b>Created by</b>	Annabelle Quinto Madrigal
<b>Date Created</b>	15/09/2024

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Bid Notice Abstract

Request for Quotation (RFQ)

9/23/24

Reference Number

11180422

Procuring Entity

MINDORO STATE UNIVERSITY

Title

Supply and Delivery of ICT Equipment for Records Office of MinSU Main Campus

Area of Delivery

Oriental Mindoro

<b>Solicitation Number:</b>	RFQ 2024-157	<b>Status</b>	<b>Closed</b>
<b>Trade Agreement:</b>	Implementing Rules and Regulations		
<b>Procurement Mode:</b>	Negotiated Procurement - Small Value Procurement (Sec. 53.9)	<b>Associated Components</b>	1
<b>Classification:</b>	Goods	<b>Bid Supplements</b>	0
<b>Category:</b>	Computer Furniture		
<b>Approved Budget for the Contract:</b>	PHP 50,000.00	<b>Document Request List</b>	2
<b>Delivery Period:</b>	30 Day/s		
<b>Client Agency:</b>		<b>Date Published</b>	23/08/2024
<b>Contact Person:</b>	MARK LESTER A MAGPANTAY Head, BAC Secretariat Alcate Victoria Oriental Mindoro Philippines 5205 63-9-154612960  macmagpantay@minsu.edu.ph	<b>Last Updated / Time</b>	23/08/2024 00:00 AM
		<b>Closing Date / Time</b>	30/08/2024 01:00 AM

**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 unit Desktop Computer 1  
intel core i5-124400 Desktop  
NVIDIA GeForce GY I0S0TI  
16gb DDR4, 2200MHz/256 GB  
SSD NVME + 1XTB HDD 7200 RPM  
Windows 10 Pro  
24'FHS IPS Led Monitor  
wired keyboard and mouse  
w/ headset and webcam 1080PAVR 240V  
UPS 650VA/390W Line Interactive, Small Tower UPS.  
Output Connections: 4 Sockets (4 x Universal Sockets)  
Back-up Time (Typical IT Load): 15 minutes









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



**Supply and Delivery of ICT Equipment for Records Office of MinSU Main Campus**

PR No.: PR24-0297

RFQ No. 2024-157-A

ABC Amount: Php50,000.00

Company Name : IKASA 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

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

Supplier's Signature over Printed Name

Supplier's Signature over Printed Name  
160-221-678-0000

TIN No. of Establishment

09778041725  
Contact Number

09.19.2024

Date \_\_\_\_\_

## General Conditions

1. Quotations and other requirements stated below shall be submitted to the **Bids and Awards Committee (BAC) Office, Mindoro State University -Main Campus, Alcate, Victoria, Oriental Mindoro, Philippines** on the date and time stated in this RFP.
2. Supplier shall submit the following requirements:
  - a. Duly signed original copy of Request for Quotation (RFQ). Prices shall be quoted in Philippine Pesos.
  - b. PhilGEPS Registration

MSU-BAC-FR-05.01

•Main Campus, Alcate, Victoria •Bongabong Campus, Labasan, Bongabong •Calapan City Campus, Masipit, Calapan City



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 30-Aug-2025

Issued this 30th day of August 2024.

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





## REMINDERS <sup>1</sup>

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

Certificate Reference No: 201907-34627-1821706692

<sup>1</sup>Refer to Section 4 of the Guidelines for the Use of the Government of the Philippines - Official Merchant's Registry



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 : 06-Jun-2025 TCC Number : RR9A-063-06-06-R1069-2024-E Issued By / Signatory : ROSALINDA D. CABIDOG Issuance date : 06-Jun-2024
Audited Financial Statement	Date of Filing : 08-Apr-2024 Current Asset : 277,991.20 Total Asset : 1,451,137.22 Current Liabilities : 3,385.44 Total Liabilities : 3,385.44 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

TAUMBAYAN  
MA SUSUNOD

# BUSINESS PERMIT

# 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:

RECOMMENDING APPROVAL:

APPROVED BY:

EDUARD L. REYES

Licensing Officer IV

Officer In-charge of the Permits and License Section  
Office of the City Mayor

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.







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	X 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.



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	X Head Office	Branch
REGISTERED ADDRESS SITIO PROPER 3, BULUSAN 5200 CITY OF CALAPAN (CAPITAL) ORIENTAL MINDORO PHILIPPINES		

TAXPAYER TYPE/S	SINGLE PROPRIETORSHIP ONLY (RESIDENT CITIZEN)
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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		



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.



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## 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
<b>TOTAL AMOUNT</b>	<b>PHP 30.00</b>
Reference Number	5348-10092023-515983
<b>Date and Time</b>	<b>2023-10-09 10:27:39</b>
Confirmation No.	00010092023102738839
Transaction No.	Zo20231009102738515983

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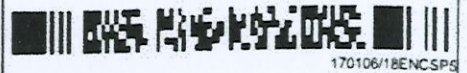
Republic of the Philippines  
Department of Finance  
Bureau of Internal Revenue

For BIR Use Only BCS/Item

BIR Form No <b>1701</b> January 2018 (ENC5) Page 1	<b>Annual Income Tax Return</b> Individuals (including MIXED Income Earner), Estates and Trusts <small>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.</small>	 1701 01/18ENC5 P1
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1 For the year 12 / 20 23	2 Amended Return? Yes No	3 Short Period Return? Yes No		
<b>PART I - Background Information on Taxpayer/Filer</b>				
4 Taxpayer Identification Number (TIN) 160 - 221 - 678 - 000	5 RDO Code 063			
6 Taxpayer Type Single Proprietor Professional Estate Trust Compensation Earner				
7 Alphabetic Tax Code (ATC) B012 Business Income - Graduated IT Rates B014 Income from Profession - Graduated IT Rates B013 Mixed Income - Graduated IT Rates B011 Compensation Income - 8% IT Rate B015 Business Income - 8% IT Rate B017 Income from Profession - 8% IT Rate B016 Mixed Income - 8% IT Rate				
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				
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 No	14 Foreign Tax Number (if applicable)		
15 Contact Number (Landline/Celphone No.) 09308147583	16 Civil Status (if applicable) Single Married Legally Separated Widower			
17 If married, spouse has income? Yes No	18 Filing Status Joint Filing Separate Filing			
19 Income EXEMPT from Income Tax? (If yes, fill out also consolidation of ALL activities per Tax Regime (Part XI)) Yes No	20 Income subject to SPECIAL/PREFERENTIAL RATE? (If yes, fill out also consolidation of ALL activities per Tax Regime (Part XI)) Yes No			
21 Tax Rate* (choose one) Graduated Rates (Choose Method of Deduction in Item 21A) 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))				
21A Method of Deduction (choose one) Itemized Deduction (Sec. 34(A) - NIRC) Optional Standard Deduction (OSD) (40% of Gross Sales/Receipts/Revenues/Fees (Sec. 34(L) - NIRC)				
<b>PART II - Total Tax Payable</b>				
22 Tax Due (From Part VI Item 51)	A. Taxpayer/Filer 44 936	B. Spouse 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 To be issued a Tax Credit Certificate (TCC) To be carried over as tax credit for next year/quarter				
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		
<b>PART III - Details of Payment</b>				
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

170106/18ENCSPS

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  
(If yes, fill out also consolidation of ALL Activities per Tax Regime (Part X))11 Income subject to SPECIAL/PREFERENTIAL RATE? Yes No  
(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 employer's 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)

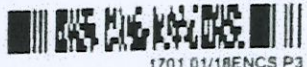
## 3A- For Graduated Income Tax Rates

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. <b>1701</b> January 2018 (ENCS) Page 3	<b>Annual Income Tax Return</b> Individuals (including MIXED Income Earner), Estates and Trusts	 1701 01/18ENCS P3
TIN 160 - 221 - 678 - 000	Taxpayer/Filer's Last Name MENIDOZA	

<b>3.B - For 8% Flat Income Tax Rate</b> <small>(over 50 is more rounded up)</small>			<small>(DO NOT enter Centavos 48 Centavos or Less drop)</small>	
Particulars	A) Taxpayer/Filer	B) Spouse		
26 Sales Revenues Receipts/Fees (net of sales returns, allowances and discounts)	0	0		

<b>Add Other Non-Operating Income</b> (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 (Loss) (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) <small>(Sum of Items 31 and 31) (To Part V, Item 1)</small>	0	0

<b>Schedule 4 - Ordinary Allowable Itemized Deductions</b> (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. Add 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

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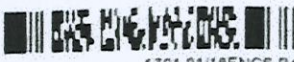
<b>5.A - Taxpayer/Filer</b>		Legal Basis	Amount
1			0
2			0
3 Total Special Allowable Itemized Deductions-Taxpayer/Filer (Sum of Items 1 and 2) (To Part V Schedule 3 A Item 14A)			0
<b>5.B - Spouse</b>		Legal Basis	Amount
4			0
5			0
6 Total Special Allowable Itemized Deductions-Spouse (Sum of Items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

<b>Schedule 6 - Computation of Net Operating Loss Carry Over NOLCO</b>		
<b>6.A - Computation of NOLCO</b>		
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

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



BIR Form No <b>1701</b> January 2018 (ENC5) Page 4		<b>Annual Income Tax Return</b> Individuals (including MIXED Income Earner), Estates and Trusts		 1701 01/18ENC5 P4	
TIN 160 - 221 - 678 - 000		Taxpayer/Filer's Last Name KIM NICHZA			

(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 <sup>th</sup> Quarter	18,215 0
5	Creditable Tax Withheld per BIR Form No. 2316 (From Part V Schedule 1 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
9	Other Tax Credits/Payments (Sum A)	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 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 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 6 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 130,000 + 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



1701

January 2018 (ENC-5)  
Page 1m

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



1701-21-9F NCS P1m

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

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 (MMDD/YYYY)								
6 Expiration Date of Tax Relief/Exemption To (MMDD/YYYY)								

SCHEDULE B - Computation of Income Tax

Description	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 8A/8B)	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
6 Ordinary Allowable Itemized Deductions (EXEMPT/SPECIAL: From Schedule C item 1B) 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	0	0	0	0	0	0	0	0
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			0	0
11 Net Income/(Loss) (If letter B of instruction above is marked, from all of Part XI Schedule B item 9) (LOSD: Item 3 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			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 5B/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



1701

January 2018 (ENCS)  
Page 2mAnnual Income Return  
Consolidation of ALL Activities per Tax Regime

1701 01-18ENCS P2m

Taxpayer Identification Number (TIN)

160 221 678 000

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





**BUREAU OF INTERNAL REVENUE**

REVENUE REGION NO. 9A - CaBaMiRo  
CITY OF STO. TOMAS, BATANGAS  
QF-TCC-01-01-2023.00

TCBP NO. RR9A-063-06-06-R1069-2024-E

# 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**

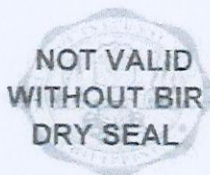
Taxpayer Identification Number

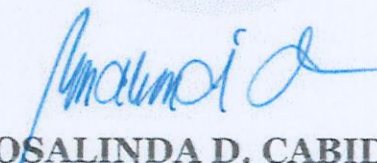
This is to certify that the above mentioned taxpayer is eligible for issuance of this Tax Clearance Certificate having satisfied all the criteria set forth by the BIR as of the date of this certification pursuant to Revenue Regulations No. 8-2016, as amended.

Tax liabilities recorded after the aforesaid dates or outside the jurisdiction of this Office are not covered by this tax clearance.

Issued this 6th day of June, 2024.

NOTE: THIS CERTIFICATE SHALL BE VALID AND EFFECTIVE FROM DATE OF ISSUE UNTIL **JUNE 06, 2025** ONLY OR UNTIL REVOKED FOR VIOLATION OF THE CRITERIA SPECIFIED UNDER REVENUE REGULATIONS NO. 8-2016, AS AMENDED AND REVENUE MEMORANDUM ORDER NO. 46-2018, WHICHEVER COMES EARLIER. THIS SHALL NOT BE USED ON SALES/TRANSFER OF REAL PROPERTIES. CERTIFICATION FEE OF P100 WAS PAID ON JUNE 04, 2024 UNDER EFPS PAYMENT TRANSACTION NO. 241978982. ANY ERASURE MADE ON THIS TCC SHALL RENDER IT NULL AND VOID.



  
**ROSALINDA D. CABIDOG**  
Chief, Collection Division

DOCUMENTARY STAMP TAX  
DATE OF PAYMENT: 06/04/2024  
PAYMENT CONFIRMATION:  
241979442  
AMOUNT: P30.00

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





This certifies that

**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

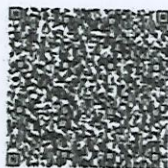
**Certificate of Business Name Registration**

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

Documentary Stamp Tax Paid Php 30.00



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

APPROVED BUDGET FOR THE CONTRACT (ABC)  
Supply and Delivery of ICT Equipments for Records Office of MinSU Main Campus  
Alcate, Victoria, Oriental Mindoro  
Project Name and Location

Stations: Mindoro State University  
Length:

ITEM NO.	DESCRIPTION	QUANTITY	UNIT	CURRENT MARKET PRICE	TOTAL COST	VAT, OTHER TAXES AND/OR DUTIES APPLICABLE	FREIGHT & INSURANCE	OTHER INDIRECT COSTS	Contract Duration:					TOTAL COST	UNIT COST	
									OTHER COST FACTORS			INFLATION, CURRENCY	VALUE			CURRENCY
									%	INFLATION, CURRENCY						
										%	VALUE					
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)				
1	Desktop Computer	1	Unit	50,000.00	50,000.00					(5)X(9)	(10%[(5)+(10)])	(11) / (3)				
	intel core i5-12400 Desktop				-											
	NVIDIA GeForce GY 1050TI				-											
	16gb DDR4, 2200MHz/256 GB				-											
	SSD NVME + 1XTB HDD 7200 RPM				-											
	Windows 10 Pro				-											
	24'FHS IPS Led Monitor				-											
	wired keyboard and mouse				-											
	w/ headset and webcam 1080PAVR 240V				-											
	UPS 650VA/390W Line Interactive, Small Tower				-											
	UPS.				-											
	Output Connections: 4 Sockets (4 x Universal Sockets)				-											
	Back-up Time (Typical IT Load): 15 minutes				-											
	Boost and buck AVR for voltage stabilization.				-											
	Compact size, Lightweight.				-											
	Auto restart while AC is recovering & off-mode charging.				-											
	XXXXXXXXXXXXXXXXXXXXXXXXXXXX				-											
	GRAND TOTAL				50,000.00											

Prepared by

Submitted by

Recommending Approval

Approved

RENELITO C. NICO  
Member, BAC Secretariat

Engr. MARK LESTER A. MAGPANTAY  
Head, BAC Secretariat

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

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









Mindoro State University

JOB ORDER FORM

2024 -  
JOB ORDER #: 067

TIME OF REQUEST	
Date: (mm/dd/yy)	06/20/24
Time: (hh:mm)	02:52 PM
Name of Client	VICTORIA CASTILLO
Dept./Office	Records
Contact No.	

Brief description of what is wrong/needs to be done.	
Equipment No.	0666 desktop PC
	with monitor and mouse

Type of Service Request: (Please check)

<input checked="" type="checkbox"/> Repair/Troubleshoot	<input type="checkbox"/> Network Connectivity
<input checked="" type="checkbox"/> Software Installation	<input type="checkbox"/> Internet Service
<input checked="" type="checkbox"/> Formatting	<input type="checkbox"/> Others: Please specify

To be accomplished by the attending MIS Personnel	
SCHEDULED RESPONSE TIME	
Date: (mm/dd/yy)	06/20/24
Time: (hh:mm)	02:55 PM
Verified by Client	<i>[Signature]</i>
STATUS (Please check)	
Pending	
Ongoing	
Completed	<input checked="" type="checkbox"/>

Problem(s) Found	PC is outdated - Lagging response - Unexpected shutdown.
Solution Applied	Tried to update drivers and troubleshoot but the pc is too old.
Recommendation (if any)	For replacement due to unavailability of parts.

Service Completed	
<i>[Signature]</i> REAN F. GODOY MIS Personnel	06/21/24 Date
(Signature over printed name)	(mm/dd/yy)

Service Verified by Client	
<i>[Signature]</i> VICTORIA M. CASTILLO Clientele/Dept.	06/20/24 Date
(Signature over printed name)	(mm/dd/yy)



Inventories Tag No. \_\_\_\_\_  
 Property No. \_\_\_\_\_

**SUPPLIES EQUIPMENT**

Mindoro State College of Agriculture and Technology  
 Victoria, Oriental Mindoro

Article and description MONITOR / SAMSUNG

Unit UNIT Quantity 1

Conditions and other remarks FUNCTIONAL

Location COMPUTER LABORATORY 2

Date of Count \_\_\_\_\_

**NOTE: PLEASE DO NOT REMOVE**

COA Representative \_\_\_\_\_ Agency Representative \_\_\_\_\_

**BUYQUBE SWITCHING POWER SUPPLY**  
**MODEL: ATX-650W**

<b>AC INPUT:</b>	<b>DC OUTPUT (MAX):650W</b>					
230V-50Hz	+5V	-5V	+12V	-12V	+3.3V	+5VSB
<b>PLEASE SELECT</b>	44A	0.5A	21A	0.5A	31A	2.0A
<b>RIGHT VOLTAGE</b>						

**CAUTION!**  
 Do not remove this cover under any circumstances.  
 Trained service people only.  
 No serviceable components inside.

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