



**SUPPLY AND DELIVERY OF OFFICE SUPPLIES, PHOTOCOPIER TONER, OFFICE EQUIPMENT AND FURNITURE & FIXTURES  
FOR THE COMPUTER ENGINEERING PROGRAM AT MinSU BONGABONG CAMPUS**

Name of Project

**BAC Resolution Recommending Approval  
Resolution No. 208, 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) No. 2024-188 for the project "Supply and Delivery of Office Supplies, Photocopier Toner, Office Equipment and Furniture & Fixtures for the Computer Engineering Program at MinSU Bongabong Campus" with an Approved Budget for the Contract (ABC) amounting to One Hundred Eighty-Eight Thousand Six Hundred Seventy-Three Pesos 91/100 (Php188,673.91) with four (4) lots specifically;

| Particulars                 | Sub-ABC Amount |
|-----------------------------|----------------|
| Lot 1 – Office Supplies     | Php95,870.00   |
| Lot 2 – Photocopier Toner   | Php39,000.00   |
| Lot 3- Office Equipment     | Php34,090.00   |
| Lot 4- Furniture & Fixtures | Php19,713.91   |

WHEREAS, in response to the 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, IRAYA LIFE ENTERPRISES submitted price quotation for Lot 1; while no supplier submitted price quotation for Lots 2,3 and 4.

WHEREAS, the detailed evaluation of price quotation resulted in the following:

| Lot No. | Approved Budget for the Contract (ABC) | Name of Bidder         | Price Quotation |
|---------|----------------------------------------|------------------------|-----------------|
| 1       | Php95,870.00                           | Iraya Life Enterprises | Php90,728.00    |

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) for Lot 1;

WHEREAS, the BAC recommended the second publication of Lots 2,3 and 4 in the PhilGEPS and MinSU Website and other conspicuous place in the university;

NOW, THEREFORE, BE IT RESOLVED that the BAC hereby recommends to the Head of Procuring Entity the approval of awarding the contract involving the project, "Supply and Delivery of Office Supplies, Photocopier Toner, Office Equipment and Furniture & Fixtures for the Computer Engineering Program at MinSU Bongabong Campus " as follows:

- a. Lot No. 1 to Iraya Life Enterprises as the supplier/bidder with Single Calculated Responsive Bid (SCRB);

BE IT RESOLVED FURTHER that the BAC hereby recommends to the Head of the Procuring Entity the second publication of Lots 2,3 and 4 in the PhilGEPS, MinSU Website and other conspicuous place in the University;

RESOLVED, this 15<sup>th</sup> day of October, 2024 at MinSU Main Campus, Alcate, Victoria, Oriental Mindoro.

Engr. MARK LESTER A. MAGPANTAY  
BAC Vice-Chairperson

FRANIE M. AFABLE, DBMHM  
BAC Member

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

ATTY. SHERLYN A. LAYESA  
BAC Member

MELGAR G. FADRIQUELAN  
BAC Member

[ ] Approved / [ ] Disapproved

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

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





# PhilGEPS

Philippine Government Electronic Procurement System

Central Portal for  
Philippine Government  
Procurement Opportunities

## Bid Notice Abstract

### Request for Quotation (RFQ)

**Reference Number** 11339402  
**Procuring Entity** MINDORO STATE UNIVERSITY  
**Title** Supply and Delivery of Office Supplies, Photocopier Toner, Office Equipment and Furniture & Fixtures for the Computer Engineering Program at MinSU Bongabong Campus  
**Area of Delivery** Oriental Mindoro

|                                          |                                                                                                                                                     |                              |                     |
|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|---------------------|
| <b>Solicitation Number:</b>              | RFQ No.: 2024-188                                                                                                                                   | <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>                         | Office Supplies and Devices                                                                                                                         |                              |                     |
| <b>Approved Budget for the Contract:</b> | PHP 188,673.91                                                                                                                                      | <b>Document Request List</b> | 4                   |
| <b>Delivery Period:</b>                  | 30 Day/s                                                                                                                                            |                              |                     |
| <b>Client Agency:</b>                    |                                                                                                                                                     | <b>Date Published</b>        | 10/10/2024          |
| <b>Contact Person:</b>                   | Christian B. Apostol<br>BAC Secretariat Head<br>Alcate<br>Victoria<br>Oriental Mindoro<br>Philippines 5205<br>63-43-2862368<br>cbapotel21@gmail.com | <b>Last Updated / Time</b>   | 10/10/2024 00:00 AM |
|                                          |                                                                                                                                                     | <b>Closing Date / Time</b>   | 14/10/2024 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.

CIEDELLE PIOL-SALAZAR, J.D., 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

Lot 1 - Office Supplies

1 box Ballpen (I-GEL, GL-165) blk/red 2

2 box Ballpen (I-GEL, GL-165) blue 2

3 box Ballpen Oil Gelpen OG-5 50's 2

4 pcs Certificate holder short (green) 10

5 pcs Clear folder long-green 50

6 reams Bond paper A4 subs 20 8

7 reams Bond paper short subs 20 14

8 pcs Expanded envelop w/ garter long 60

9 reams Bond Paper long subs 20 8

10 ream Vellum Board short 1

11 sets Printer Ink #003 (genuine) (B/C/M/Y) 13

12 reams Bond Paper long subs 24 82

13 reams Bond A4 subs 24 20



[illegible]

**Created by** Annabelle Quinto Madrigal

**Date Created** 09/10/2024

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.





**Mindoro State University**  
Victoria, Oriental Mindoro 5205 Philippines

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



### REQUEST FOR QUOTATION

Supply and Delivery of Office Supplies, Photocopier Toner, Office Equipment and Furniture & Fixtures for the Computer Engineering Program at MinSU Bongabong Campus

PR No: 2024-155

RFQ No.: 2024-188

ABC Amount: Php188,673.91

Lot1: Php95,870.00

Lot2: Php39,000.00

Lot3: Php34,090.00

Lot 4: Php19,713.91

Company Name : IRAYA LIFE ENTERPRISES  
Address : BULSAN 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.

**CIEDELLE PIOL-SALAZAR, J.D., 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 |
|--------------------------------|-------|--------------------------------------|------|------------|--------------|
| <b>Lot 1 - Office Supplies</b> |       |                                      |      |            |              |
| 1                              | box   | Ballpen (I-GEL, GL-165) blk/red      | 2    | 377        | 754 -        |
| 2                              | box   | Ballpen (I-GEL, GL-165) blue         | 2    | 377        | 754 -        |
| 3                              | box   | Ballpen Oil Gelpen OG-5 50's         | 2    | 226        | 452 -        |
| 4                              | pcs   | Certificate holder short (green)     | 10   | 69         | 690 -        |
| 5                              | pcs   | Clear folder long-green              | 50   | 38         | 1,900 -      |
| 6                              | reams | Bond paper A4 subs 20                | 8    | 361        | 2,888 -      |
| 7                              | reams | Bond paper short subs 20             | 14   | 345        | 4,830 -      |
| 8                              | pcs   | Expanded envelop w/ garter long      | 60   | 57         | 3,420 -      |
| 9                              | reams | Bond Paper long subs 20              | 8    | 443        | 3,544 -      |
| 10                             | ream  | Vellum Board short                   | 1    | 480        | 480 -        |
| 11                             | sets  | Printer Ink #003 (genuine) (B/C/M/Y) | 13   | 1765       | 22,945 -     |
| 12                             | reams | Bond Paper long subs 24              | 82   | 365        | 29,930 -     |
| 13                             | reams | Bond A4 subs 24                      | 20   | 360        | 7,200 -      |
| 14                             | pcs   | Double Sided tape                    | 4    | 55         | 220 -        |
| 15                             | box   | Gel pen black 0.5                    | 3    | 429        | 1,287 -      |
| 16                             | bot   | Glue 240gr                           | 2    | 188        | 376 -        |
| 17                             | pcs   | Brown envelop long                   | 25   | 8.00       | 200 -        |
| 18                             | reams | Folder long 14 pts                   | 1    | 1,397      | 1,397 -      |
| 19                             | pcs   | Whiteboard Marker black              | 10   | 88         | 880 -        |
| 20                             | bots  | Whiteboard Ink Refill blk            | 10   | 234        | 2,340 -      |
| 21                             | box   | Permanent Marker blk                 | 1    | 738        | 738 -        |
| 22                             | box   | Paper clip 48mm                      | 1    | 83         | 83 -         |
| 23                             | box   | Paper clips 32mm                     | 2    | 60         | 120 -        |
| 24                             | pack  | Photo paper A4                       | 5    | 48         | 240 -        |

MSU-BAC-FR-05.01



# Mindoro State University

Victoria, Oriental Mindoro 5203 Philippines

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



|                                                                              |       |                                                     |   |      |           |
|------------------------------------------------------------------------------|-------|-----------------------------------------------------|---|------|-----------|
| 25                                                                           | pcs   | Record Book 500lvs                                  | 1 | 181- | 181-      |
| 26                                                                           | bots  | Stamp pad ink                                       | 1 | 28-  | 28-       |
| 27                                                                           | pcs   | Stamp pad felt pad #2                               | 1 | 63-  | 63-       |
| 28                                                                           | pcs   | Correction tape 6mx.5mm                             | 4 | 697  | 2788-     |
| <b>sub-total (LOT 1)</b>                                                     |       |                                                     |   |      | 99,728.00 |
| <b>Lot 2- Photocopier Toner</b>                                              |       |                                                     |   |      |           |
| 1                                                                            | crg   | Print cartridge Black -IM C2503                     | 1 |      |           |
| 2                                                                            | crg   | Print cartridge Magenta -IM C2503                   | 1 |      |           |
| 3                                                                            | crg   | Print cartridge Cyan -IM C2503                      | 1 |      |           |
| 4                                                                            | crg   | Print cartridge Yellow -IM C2503                    | 1 |      |           |
| <b>sub-total (LOT 2)</b>                                                     |       |                                                     |   |      |           |
| <b>Lot 3- Office Equipment</b>                                               |       |                                                     |   |      |           |
| 1                                                                            | units | Printer                                             | 2 |      |           |
|                                                                              |       | Print, scan, copy                                   |   |      |           |
|                                                                              |       | Compact Integrated tank design                      |   |      |           |
|                                                                              |       | Auto duplex printing                                |   |      |           |
|                                                                              |       | ADF capability                                      |   |      |           |
|                                                                              |       | Ethernet & WiFi Direct                              |   |      |           |
|                                                                              |       | Borderless printing up to A4                        |   |      |           |
|                                                                              |       | Spill free ink refilling                            |   |      |           |
| <b>sub-total (LOT 3)</b>                                                     |       |                                                     |   |      |           |
| <b>Lot 4 - Furniture &amp; Fixtures</b>                                      |       |                                                     |   |      |           |
| 1                                                                            | pcs   | Cabinet                                             | 1 |      |           |
|                                                                              |       | 6 layer                                             |   |      |           |
|                                                                              |       | LF big foldable cabinet Durabox w/ Magnetic Suction |   |      |           |
|                                                                              |       | Higher Floors 38cm                                  |   |      |           |
|                                                                              |       | Enlarged pipe diameter 50m                          |   |      |           |
|                                                                              |       | Thicker layers 50mm                                 |   |      |           |
| <b>sub-total (LOT 4)</b>                                                     |       |                                                     |   |      |           |
| XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX |       |                                                     |   |      |           |
| <b>TOTAL</b>                                                                 |       |                                                     |   |      | 99,728.00 |

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

MARIA JOY M. C. MENDOZA  
Supplier's Signature over Printed Name  
160-221-678-00000  
TIN No. of Establishment  
09775041725  
Contact Number  
10.14.2024  
Date



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.*



# List of Eligibility Documents

of

## IRAYA LIFE ENTERPRISES

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

|                                    |                                                                                                                                                                                                                       |
|------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>DTI Certificate</b>             | DTI Certificate Number : 3394982<br>Issued By / Signatory : Ramon Lopez<br>Registration Date : 05-Jan-2022<br>Expiration Date : 11-Jan-2027                                                                           |
| <b>Mayors Permit</b>               | Expiration Date : 31-Dec-2024<br>Permit Number : 0170000049<br>Place of Issue : Calapan City<br>Issued By / Signatory : Malou F. Morillo<br>Issuance Date : 12-Jan-2024                                               |
| <b>Tax Clearance</b>               | Expiration Date : 06-Jun-2025<br>TCC Number : RR9A-063-06-06-R1069-2024-E<br>Issued By / Signatory : ROSALINDA D. CABIDOG<br>Issuance date : 06-Jun-2024                                                              |
| <b>Audited Financial Statement</b> | Date of Filing : 08-Apr-2024<br>Current Asset : 277,991.20<br>Total Asset : 1,451,137.22<br>Current Liabilities : 3,385.44<br>Total Liabilities : 3,385.44<br>Name of Auditor : Elvin P. Vargas<br>BIR RDO Code : 063 |
| <b>PCAB License</b>                | Expiration Date : -<br>Issued By / Signatory :<br>Issuance Date : -<br>License Number :<br>License First Issue Date : -<br>Principal Classification :<br>Category :                                                   |





Republic of the Philippines  
CITY OF CALAPAN  
OFFICE OF THE CITY MAYOR  
**BUSINESS PERMIT**

**TAUMBAYAN** ANG  
**MA** SUSUNOD

**2024**

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

**P 5,287.50**

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

Payment for 1-4

Notes:

- This Permit will expire on  
**Dec. 31, 2024**
- 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.





REPUBLICA 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

|                                                                                                                  |                                                           |                                              |
|------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|----------------------------------------------|
| <b>TIN &amp; BRANCH CODE</b><br>160-221-678-00000                                                                | <b>NAME OF TAXPAYER</b><br>MENDOZA, MARIA SOCORRO CASALLA | <b>TIN ISSUANCE DATE</b><br>December 7, 1999 |
| <b>REGISTERING OFFICE</b>                                                                                        | X Head Office                                             | Branch                                       |
| <b>REGISTERED ADDRESS</b><br>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<br>2nd Quarter-on or before AUGUST 15 3rd Quarter-on or before November 15                                                                                                             |
| INDIVIDUAL INCOME TAX             | 1701       | February 15, 2017 | ANNUALLY         | On or before April 15 of each year covering income for the preceding taxable year.                                                                                                                                     |
| REGISTRATION FEE                  | 0605       | January 18, 2017  | ANNUALLY         | On or before the last day of January.                                                                                                                                                                                  |
| VALUE ADDED TAX                   | 2550Q      | October 7, 2021   | QUARTERLY        | Not later than the 25th day following the close of each taxable quarter.                                                                                                                                               |
| WITHHOLDING TAX - EXPANDED/OTHERS | 0619E      | October 7, 2021   | MONTHLY          | On or before the 10th day of the month following the month in which withholding was made.                                                                                                                              |
| WITHHOLDING TAX - EXPANDED/OTHERS | 1601EQ     | October 7, 2021   | QUARTERLY        | Not later than the last day of the month following the close of the quarter during which withholding was made.                                                                                                         |
| WITHHOLDING TAX - EXPANDED/OTHERS | 1604E      | January 1, 2022   | ANNUALLY         | On or before March 1 of the year following the calendar year in which the income payments subject to expanded withholding taxes or exempt from withholding tax were paid or accrued.                                   |
| WITHHOLDING TAX - COMPENSATION    | 1604CF     | April 16, 2019    | ANNUALLY         | On or before January 31 of the year following the calendar year in which compensation payment and other income payments subject to ginal withholding taxes were paid or accrued.                                       |
| WITHHOLDING TAX - COMPENSATION    | 1601C      | April 16, 2019    | MONTHLY          | On or before the 10th day of the month following the month when the withholding was made except for taxes withheld for December which shall be filed and paid/remitted on or before January 15 of the succeeding year. |





**REPUBLIKA NG PILIPINAS**  
**KAGAWARAN NG PANANALAPI**  
**KAWANIHAN NG RENTAS INTERNAS**  
**REVENUE REGION NO. 09A - CABAMIRO (CAVITE-BATANGAS-MINDORO-ROMBLON)**  
**REVENUE DISTRICT OFFICE NO. 063 - CALAPAN, ORIENTAL MINDORO**

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

## CERTIFICATE OF REGISTRATION

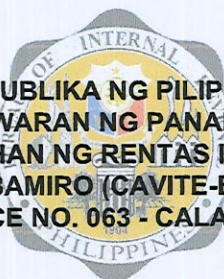
|                                                                                                                  |                                                           |                                              |
|------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|----------------------------------------------|
| <b>TIN &amp; BRANCH CODE</b><br>160-221-678-00000                                                                | <b>NAME OF TAXPAYER</b><br>MENDOZA, MARIA SOCORRO CASALLA | <b>TIN ISSUANCE DATE</b><br>December 7, 1999 |
| <b>REGISTERING OFFICE</b>                                                                                        | X Head Office                                             | Branch                                       |
| <b>REGISTERED ADDRESS</b><br>SITIO PROPER 3, BULUSAN 5200 CITY OF CALAPAN (CAPITAL) ORIENTAL MINDORO PHILIPPINES |                                                           |                                              |

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



**2303**

REVISED: APRIL 2019



**REPUBLIKA NG PILIPINAS**  
**KAGAWARAN NG PANANALAPI**  
**KAWANIHAN NG RENTAS INTERNAS**  
**REVENUE REGION NO. 09A - CABAMIRO (CAVITE-BATANGAS-MINDORO-ROMBLON)**  
**REVENUE DISTRICT OFFICE NO. 063 - CALAPAN, ORIENTAL MINDORO**

OCN: 063RC20230000003982

Date OCN Generated: October 9, 2023

## CERTIFICATE OF REGISTRATION

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

**REMINDERS:**

1. An annual registration fee shall be paid upon registration and every year thereafter on or before the last day of January, using BIR Form No. 0605.
2. Filing of required tax return/s to conform with the above tax types, whether with or without business operation, to avoid penalties.
3. For new business registrants, application for registration of manual Books of Accounts (B/As) shall be before the deadline for filing of the initial quarterly income tax return or annual income tax return whichever comes earlier, from the date of registration. Registration of new set of manual B/As shall be before its use.
4. Immediately inform the district office in case of transfer/cessation of business and other changes in registration information by filing BIR Form No. 1905.
5. For Self-Employed Individuals (SEI) whose gross sales and/or receipts and other non-operating income does not exceed P3,000,000 and who opted to avail of the 8% Income tax rate, the tax type Percentage Tax (PT) shall not be reflected in the Certificate of Registration (COR). However, at the start of each taxable year, such SEI shall be automatically subjected to graduated income tax rates and required to file quarterly percentage tax return (BIR Form No. 2551Q) and option to replace the COR to reflect "PT", unless qualified and opted to avail of the 8% Income tax rate annually.

RDO DRY SEAL

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

**EMELITA R. ABO**

REVENUE DISTRICT OFFICER  
(Signature over Printed Name)

THIS CERTIFICATE MUST BE EXHIBITED CONSPICUOUSLY IN THE PLACE OF BUSINESS.



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

## Receipt

### BUREAU OF INTERNAL REVENUE ORUS DOCUMENTARY STAMP TAX

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

|                      |                            |
|----------------------|----------------------------|
| ARN                  | DSU2310063210499           |
| Registered Name      | MARIA SOCORRO MENDOZA      |
| Form Type            | 0605                       |
| Tax Type             | DS                         |
| Return Period        | 10-09-23 10:26:36          |
| Email Address        | dmariasocorro@yahoo.com    |
| TIN                  | 160221678                  |
| Branch Code          | 00000                      |
| Amount Due           | PHP 30.00                  |
| <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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**Your BIR AFS eSubmission uploads were received**

eafs@bir.gov.ph <eafs@bir.gov.ph>

Mon 4/8/2024 1:49 AM

To: MENDOZA.SOCORRO114@OUTLOOK.COM <MENDOZA.SOCORRO114@OUTLOOK.COM>

Cc: DMARIASOCORRO@YAHOO.COM <DMARIASOCORRO@YAHOO.COM>

Hi MENDOZA, MARIA SOCORRO CASALLA,

**Valid files**

- EAFS160221678TCRTY122023-01.pdf
- EAFS160221678AFSTY122023.pdf
- EAFS160221678ITRTY122023.pdf

**Invalid file**

- <None>

Transaction Code: **AFS-0-88L8HFFK02M2MV112NYRRTM34068DKGHDD**

Submission Date/Time: **Apr 08, 2024 09:49 AM**

Company TIN: **160-221-678**

Please be reminded that you accepted the terms and conditions for the use of this portal and expressly agree, warrant and certify that:

- The submitted forms, documents and attachments are complete, truthful and correct based on the personal knowledge and the same are from authentic records;
- The submission is without prejudice to the right of the BIR to require additional document, if any, for completion and verification purposes;
- The hard copies of the documents submitted through this facility shall be submitted when required by the BIR in the event of audit/investigation and/or for any other legal purpose.

This is a system-generated e-mail. Please do not reply.





Republic of the Philippines  
Department of Finance  
Bureau of Internal Revenue

For BIR Use Only  
BCS/Item

BIR Form No  
**1701**

January 2018 (ENCS)  
Page 1

## Annual Income Tax Return

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



1701 01/18ENCS P1

|                                                                                                                                                                                                                                                                                                                  |                                                                             |                                                                                                                                              |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 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<br>Single Proprietor Professional Estate Trust Compensation Earner                                                                                                                                                                                                                               |                                                                             |                                                                                                                                              |
| 7 Alphabetic Tax Code (ATC)<br>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)<br>M. NOZA 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)<br>SITIO PROPER 3, BULUSAN CITY OF CALAPAN CAPITAL, ORI                                                                     |                                                                             |                                                                                                                                              |
| 9A Zip Code                                                                                                                                                                                                                                                                                                      |                                                                             | 5200                                                                                                                                         |
| 10 Date of Birth (MM/DD/YYYY)<br>09/25/1971                                                                                                                                                                                                                                                                      | 11 Email Address<br>irayalife@yahoo.com                                     |                                                                                                                                              |
| 12 Citizenship<br>FILIPINO                                                                                                                                                                                                                                                                                       | 13 Claiming Foreign Tax Credits?<br>Yes No                                  | 14 Foreign Tax Number (if applicable)                                                                                                        |
| 15 Contact Number 15 (Landline/Cellphone No.)<br>09308147583                                                                                                                                                                                                                                                     | 16 Civil Status (if applicable)<br>Single Married Legally Separated Widower |                                                                                                                                              |
| 17 If married, spouse has income?<br>Yes No                                                                                                                                                                                                                                                                      |                                                                             | 18 Filing Status<br>Joint Filing Separate Filing                                                                                             |
| 19 Income EXEMPT from Income Tax?<br>Yes No<br>(If yes, fill out also consolidation of ALL activities per Tax Regime (Part X))                                                                                                                                                                                   |                                                                             | 20 Income subject to SPECIAL/PREFERENTIAL RATE?<br>Yes No<br>(If yes, fill out also consolidation of ALL activities per Tax Regime (Part X)) |
| 21 Tax Rate* (choose one)<br>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)<br>Itemized Deduction (Sec. 34(A-J) NIRC) Optional Standard Deduction (OSD) (40% of Gross Sales/Receipts/Revenues/Fees (Sec. 34(L) NIRC)                                                                                                                                    |                                                                             |                                                                                                                                              |

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

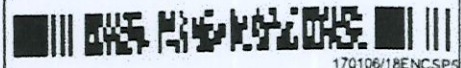
33 Number of Attachments 0

| <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



170106/18ENCSPE

|                                                                                                                                                                                                                                                                                              |                                          |                                                                                                                                                 |                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|
| TIN<br>160 - 221 - 678 - 000                                                                                                                                                                                                                                                                 |                                          | Tax Filer's Last Name<br>MENDOZA                                                                                                                |                                           |
| <b>PART IV - Background Information of Spouse</b>                                                                                                                                                                                                                                            |                                          |                                                                                                                                                 |                                           |
| 1 Spouse's Taxpayer Identification Number                                                                                                                                                                                                                                                    |                                          | 2 RDO Code                                                                                                                                      |                                           |
| 3 Filer's Spouse Type<br>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<br>(If yes, fill out also consolidation of ALL Activities per Tax Regime (Part X))                                                                                                                                                            |                                          | 11 Income subject to SPECIAL/PREFERENTIAL RATE?    Yes    No<br>(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**

|                                                                                                                                                                                                                                                                                                                                                        |          |                        |                   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------------------|-------------------|
| <b>Schedule 1 - Gross Compensation Income and Tax Withheld</b> (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 |                        | b. Employer's TIN |
|                                                                                                                                                                                                                                                                                                                                                        | Spouse   |                        |                   |
| 2                                                                                                                                                                                                                                                                                                                                                      | Taxpayer |                        | b. Employer's TIN |
|                                                                                                                                                                                                                                                                                                                                                        | Spouse   |                        |                   |
| (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 3Ac/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)**

|                                                                                                                                      |           |   |  |
|--------------------------------------------------------------------------------------------------------------------------------------|-----------|---|--|
| <b>3A - For Graduated Income Tax Rates</b>                                                                                           |           |   |  |
| 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 |  |
| <b>OR</b>                                                                                                                            |           |   |  |
| 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.<br><b>1701</b><br>January 2015 (ENC5)<br>Page 3 | <b>Annual Income Tax Return</b><br>Individuals (including MIXED Income Earner), Estates and Trusts | <br>1701 01/15ENC5 P3 |
| TIN<br>160 - 221 - 678 - 000                                 | Taxpayer/Filer's Last Name<br>M N D Z A                                                            |                       |

| 3.0 - For 8% Flat Income Tax Rate <span style="float: right; font-size: small;">(DO NOT enter Centavos. If Centavos or Less drop the 0's and round up.)</span> |                   |           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-----------|
| Particulars                                                                                                                                                    | A) Taxpayer/Filer | B) Spouse |
| 26 Sales Revenues/Receipts/Fees (net of sales returns, allowances and discounts)                                                                               | 0                 | 0         |

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

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

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

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

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



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

1701 01/18 ENC5 P4

TIN

160

221

678

000

Taxpayer/Filer's Last Name

MENDOZA

(Continuation of Schedule 6)

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

| Year Incurred | Net Operating Loss<br>A. Amount                                                 | B. NOLCO Applied<br>Previous Year/s | C. NOLCO Expired | D. NOLCO Applied<br>Current Year | E. Net Operating Loss (Unapplied)<br>[(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 3Ad/3Bd) | 0      | 0 |
| 6                                   | Tax Paid in Return Previously Filed, if this is an Amended Return                   | 0      | 0 |
| 7                                   | Foreign Tax Credits, if applicable                                                  | 0      | 0 |
| 8                                   | Special Tax Credits, if applicable (To Part VIII Item 6)                            | 0      | 0 |
| Other Tax Credits/Payments, if any: |                                                                                     |        |   |

|    |                                                                       |        |   |
|----|-----------------------------------------------------------------------|--------|---|
| 9  |                                                                       | 0      | 0 |
| 10 | Total Tax Credits/Payments (Sum of Items 1 to 9) (To Part II Item 23) | 41 550 | 0 |

## PART VIII – Tax Relief Availment

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

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

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

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

|   |  |  |
|---|--|--|
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |

|                                                               |                             |         |   |
|---------------------------------------------------------------|-----------------------------|---------|---|
| 5                                                             | Total (Sum of Items 1 to 4) | 512,179 | 0 |
| Less: A) Non-Taxable Income and Income Subjected to Final Tax |                             |         |   |

|   |  |  |
|---|--|--|
| 6 |  |  |
| 7 |  |  |

## B) Special/Other Allowable Deductions

|   |  |  |
|---|--|--|
| 8 |  |  |
| 9 |  |  |

|    |                                                 |         |   |
|----|-------------------------------------------------|---------|---|
| 10 | Total (Sum of Items 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                                     |
|-----------------------------------------|------------------------------------------------|
| 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. 120,000 + 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 (ENCS)  
Page 1mAnnual Income Return  
Consolidation of ALL Activities per Tax Regime  
(Accomplish only if with MULTIPLE Tax Regimes)

1701-21-9ENCS.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

| SCHEDULE A - Basis of Tax Relief<br>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

(DO NOT enter Carriavars. 49 Carriavars of Less drop them: 50 or more round up)

| 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 Less: Deductions Allowable under Existing Laws                                                                                                                                                                                     |                 |                  |            |                          |                 |                  |            |                          |
| 7 Ordinary Allowable Itemized Deductions (EXEMPT/SPECIAL: From Schedule C Item 18) and/or (If letter B of instruction above is marked, from all of Part XI Schedule B Item 6A/6B) (REGULAR: From Part V Schedule 3 A Item 13A/13B)   | 0               | 0                | 305,392    | 305,392                  | 0               | 0                | 0          | 0                        |
| 8 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                        |
| 9 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                        |
| 10 Total Allowable Itemized Deductions (Sum of Items 6 to 8)                                                                                                                                                                         | 0               | 0                | 305,392    | 305,392                  | 0               | 0                | 0          | 0                        |
| OR                                                                                                                                                                                                                                   |                 |                  |            |                          |                 |                  |            |                          |
| 11 Optional Standard Deduction (OSD) (40% of Item 3)                                                                                                                                                                                 |                 |                  | 0          | 0                        |                 |                  | 0          | 0                        |
| 12 Net Income/(Loss) (Item 5 Less Item 9 [OSD, 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) |                 |                  |            |                          |                 |                  |            |                          |
| 13                                                                                                                                                                                                                                   | 0               | 0                | 0          | 0                        | 0               | 0                | 0          | 0                        |
| 14                                                                                                                                                                                                                                   | 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 | 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 2m**Annual Income Return**  
Consolidation of ALL Activities per Tax Regime

1701.01.18ENCS P2m

Taxpayer Identification Number (TIN)

180 221 678 000

Tax Filer's Last Name

MENDOZA

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

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

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

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

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

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





REPUBLIC OF THE PHILIPPINES  
DEPARTMENT OF FINANCE

Annex "M"

**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

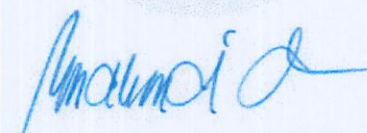
This is to certify that the above mentioned taxpayer is eligible for issuance of this Tax Clearance Certificate having satisfied all the criteria set forth by the BIR as of the date of this certification pursuant to Revenue Regulations No. 8-2016, as amended.

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.

**NOT VALID  
WITHOUT BIR  
DRY SEAL**

  
**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

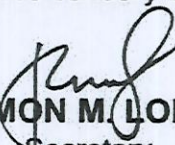
**MARIA SOCORRO CASALLA MENDOZA**

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



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

**APPROVED BUDGET FOR THE CONTRACT (ABC)**  
**Supply and Delivery of Office Supplies, Photocopier Toner, Office Equipment and**  
**Furniture & Fixtures for the Computer Engineering Program at MinSU Bongabong Campus**  
**Labasan, Bongabong, Oriental Mindoro**

Project Name and Location

Stations: Mindoro State University

Length:

| Contract Duration: |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|--------------------|-------------|----------|------|----------------------|------------|-------------------------------------------|---------------------|----------------------|---------------------|------|-------|---------------------|------|------------|-----------|-------|
| ITEM NO.           | DESCRIPTION | QUANTITY | UNIT | CURRENT MARKET PRICE | TOTAL COST | VAT, OTHER TAXES AND/OR DUTIES APPLICABLE | FREIGHT & INSURANCE | OTHER INDIRECT COSTS | OTHER COST FACTORS  |      |       |                     |      | TOTAL COST | UNIT COST |       |
|                    |             |          |      |                      |            |                                           |                     |                      | INFLATION, CURRENCY |      | VALUE | INFLATION, CURRENCY |      |            |           | VALUE |
|                    |             |          |      |                      |            |                                           |                     |                      | %                   | (10) |       | (11)                | (12) |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
| (1)                | (2)         | (3)      | (4)  | (5)                  | (6)        | (7)                                       | (8)                 | (9)                  | (10)                | (11) | (12)  | (13)                |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |
|                    |             |          |      |                      |            |                                           |                     |                      |                     |      |       |                     |      |            |           |       |









**Republic of the Philippines**  
**MINDORO STATE UNIVERSITY**  
**Bongabong Campus**  
**Labasan, Bongabong, Oriental Mindoro**



## PURCHASE REQUEST

Fund Cluster:

| Office/Section :    |       | PR No.: 2024-155                      |     | Date: July 19, 2024 |                  |
|---------------------|-------|---------------------------------------|-----|---------------------|------------------|
|                     |       | Responsibility Center Code :          |     |                     |                  |
| Stock/<br>Property  | Unit  | Item Description                      | Qty | Unit Cost           | Total Cost       |
|                     |       | <b>Lot 1 - Office supplies</b>        |     |                     |                  |
| 1                   | box   | Ballpen (I-GEL GL-165) blk/red        | 2   | 350.00              | 700.00           |
| 2                   | box   | Ballpen (I-GEL GL-165) blue           | 2   | 350.00              | 700.00           |
| 3                   | box   | Ballpen Oil Gelpen OG-5 50's          | 2   | 400.00              | 800.00           |
| 4                   | pcs   | Certificate holder short <i>green</i> | 10  | 50.00               | 500.00           |
| 5                   | PCS   | Clear folder long -green              | 50  | 30.00               | 1,500.00         |
| 6                   | reams | Bond paper A4 subs 20                 | 8   | 230.00              | 1,840.00         |
| 7                   | reams | Bond paper short subs 20              | 14  | 240.00              | 3,360.00         |
| 8                   | PCS   | Expanded envelop w/garter long        | 60  | 35.00               | 2,100.00         |
| 9                   | reams | Bond paper long subs 20               | 8   | 270.00              | 2,160.00         |
| 10                  | ream  | Vellum board short                    | 1   | 500.00              | 500.00           |
| 11                  | sets  | Printer ink # 003 (genuine)(B/C/M/Y)  | 13  | 1,800.00            | 23,400.00        |
| 12                  | reams | Bond paper long subs 24               | 82  | 500.00              | 41,000.00        |
| 13                  | reams | bond A4 subs 24                       | 20  | 450.00              | 9,000.00         |
| 14                  | pcs   | double sided tape                     | 4   | 60.00               | 240.00           |
| 15                  | bxs   | Gel pen black 0.5                     | 3   | 350.00              | 1,050.00         |
| 16                  | bot   | Glue 240gr                            | 2   | 85.00               | 170.00           |
| 17                  | pcs   | Brown envelop long                    | 25  | 25.00               | 625.00           |
| 18                  | r5eam | folder long 14 pts                    | 1   | 800.00              | 800.00           |
| 19                  | pcs   | whiteboard marker black               | 10  | 80.00               | 800.00           |
| 20                  | bots  | whiteboard ink refill blk             | 10  | 200.00              | 2,000.00         |
| 21                  | box   | Permanent marker blk                  | 1   | 600.00              | 600.00           |
| 22                  | box   | paper clip 48mm                       | 1   | 45.00               | 45.00            |
| 23                  | box   | paper clips 32mm                      | 2   | 25.00               | 50.00            |
| 24                  | pack  | photo paper A4                        | 5   | 180.00              | 900.00           |
| 25                  | pcs   | Record book 500 lvs                   | 1   | 400.00              | 400.00           |
| 26                  | bots  | stamp pad ink                         | 1   | 250.00              | 250.00           |
| 27                  | pcs   | stamp pad felt pad #2                 | 1   | 200.00              | 200.00           |
| 28                  | pcs   | Correction tape 6m x.5mm              | 4   | 45.00               | 180.00           |
| <b>Page 1 Total</b> |       |                                       |     |                     | <b>95,870.00</b> |

**Purpose:**

for computer engineering program

STF - 1071  
164-2002-990

|                |                              |                            |                                |
|----------------|------------------------------|----------------------------|--------------------------------|
| Requested by:  |                              | Recommending Approval:     | Certified Allotment Available: |
| Signature :    |                              |                            |                                |
| Printed Name : | PAQUITO G. FERNANDO          | CIEDELLE P. SALAZAR, Ph.D. | ROVELYN P. ROXAS               |
| Designation :  | PC - CCS                     | Campus Executive Director  | Budget Officer III             |
| Approved by:   |                              |                            |                                |
| Signature :    |                              |                            |                                |
| Printed Name : | ENYA MARIE D. APOSTOL, Ph.D. |                            |                                |
| Designation :  | University President         |                            |                                |





Republic of the Philippines  
**MINDORO STATE UNIVERSITY**  
Bongabong Campus  
Labasan, Bongabong, Oriental Mindoro



**PURCHASE REQUEST**

Fund Cluster:

| Office/Section :   |       | PR No.: 2024-155                                         |     | Date: July 19, 2024 |                   |
|--------------------|-------|----------------------------------------------------------|-----|---------------------|-------------------|
|                    |       | Responsibility Center Code :                             |     |                     |                   |
| Stock/<br>Property | Unit  | Item Description                                         | Qty | Unit Cost           | Total Cost        |
|                    |       |                                                          |     |                     | -                 |
| 12                 | crg   | Print cartridge black -IM C2503                          | 1   | 6,000.00            | 6,000.00          |
| 10                 | crg   | Print cartridge Magenta -IM C2503                        | 1   | 11,000.00           | 11,000.00         |
| 11                 | crg   | Print cartridge Cyan-IM C2503                            | 1   | 11,000.00           | 11,000.00         |
| 12                 | crg   | Print cartridge Yellow -IM C2503                         | 1   | 11,000.00           | 11,000.00         |
|                    |       |                                                          |     |                     | -                 |
|                    |       | <b>Lot 2- SE-F&amp;F, SE-ICTE</b>                        |     |                     | -                 |
| 1                  | units | Printer                                                  | 2   | 17,045.00           | 34,090.00         |
|                    |       | * Print, scan, copy                                      |     |                     |                   |
|                    |       | * Compack integrated tank design                         |     |                     |                   |
|                    |       | * Auto duplex printing                                   |     |                     |                   |
|                    |       | * ADF capability                                         |     |                     |                   |
|                    |       | * Ethernet & WiFi Direct                                 |     |                     |                   |
|                    |       | * Borderless printing up to A4                           |     |                     |                   |
|                    |       | * Spill free ink refilling                               |     |                     |                   |
|                    |       | lot 3                                                    |     |                     |                   |
| 1                  | pc    | Cabinet                                                  | 1   | 19,713.91           | 19,713.91         |
|                    |       | * 6 layer                                                |     |                     | -                 |
|                    |       | * LF big Foldable Cabinet Durabox w/<br>Magnetic suction |     |                     | -                 |
|                    |       | plea - dimension po. - tax                               |     |                     | -                 |
|                    |       |                                                          |     |                     | -                 |
|                    |       |                                                          |     |                     | -                 |
|                    |       |                                                          |     |                     | -                 |
|                    |       |                                                          |     |                     | -                 |
|                    |       |                                                          |     |                     | -                 |
|                    |       |                                                          |     |                     | -                 |
|                    |       | Page 1 Total                                             |     |                     | 95,870.00         |
|                    |       |                                                          |     |                     |                   |
|                    |       | <b>GRAND TOTAL</b>                                       |     |                     | <b>188,673.91</b> |

**Purpose:**  
for computer engineering program

STF - 1071  
164-20008-990

|                                                                                                            |                                                                                                                                             |                                                                                                                                    |
|------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|
| Requested by:<br>Signature :<br>Printed Name : <b>PAQUITO G. FERNANDO</b><br>Designation : <b>PC - CCS</b> | Recommending Approval:<br>Signature :<br>Printed Name : <b>CIEDELLE P. SALAZAR, Ph.D.</b><br>Designation : <b>Campus Executive Director</b> | Certified Allotment Available:<br>Signature :<br>Printed Name : <b>ROVELYN P. ROXAS</b><br>Designation : <b>Budget Officer III</b> |
|------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                |
|--------------------------------------------------------------------------------------------------------------------------------|
| Approved by:<br>Signature :<br>Printed Name : <b>ENYA MARIE D. APOSTOL, Ph.D.</b><br>Designation : <b>University President</b> |
|--------------------------------------------------------------------------------------------------------------------------------|

000-100-0000



# PROJECT PROCUREMENT MANAGEMENT PLAN (PMP)

[illegible]**TOTAL BUDGET:**

*John Edwards*  
JOHN EDWARDS, ANTHONY  
Dean, College of Computer Studies

  
NEMESIO H. DAVALOS, Ph.D.,  
Vice President for Academic Affairs



FELISA K

END-USER UNIT - BS Cpe Program  
Charged to STF - Curriculum  
Project, Programs and Activities

[illegible]

17,045.00

Recommending Approval

**JOHN EDWARDS. ANTHONY**  
Dean, College of Computer Studies

**NATHANIEL DAVAR, Ph.D.**  
Vice President for Academic Affairs



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

PROJECT PROCUREMENT MANAGEMENT PLAN (PPMP)

END-USER UNIT - BS CpE Program  
Charged to STF - Faculty  
Project, Programs and Activities

| CODE | GENERAL DESCRIPTION             | UNIT   | QTY | UNIT COST | TOTAL AMOUNT | MODE OF PROCUREMENT | SCHEDULE/ MILESTONE OF ACTIVITIES |     |     |     |     |     |     |     |      |     |     |  |
|------|---------------------------------|--------|-----|-----------|--------------|---------------------|-----------------------------------|-----|-----|-----|-----|-----|-----|-----|------|-----|-----|--|
|      |                                 |        |     |           |              |                     | Jan                               | Feb | Mar | Apr | May | Jun | Jul | Aug | Sept | Oct | Nov |  |
|      | OFFICE SUPPLIES EXPENSES        |        |     |           |              |                     |                                   |     |     |     |     |     |     |     |      |     |     |  |
| *    | Total Balance Brought Forwarded |        |     |           | 49,035.00    | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |
| *    | Gel ballpen (black)             | box    | 1 / | 350.00    | 350.00       | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |
| *    | Marker Permanent black          | box    | 1 / | 600.00    | 600.00       | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |
| *    | Paper clip (big) (48 mm)        | box    | 1 / | 45.00     | 45.00        | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |
| *    | Paper clip (small) (32 mm)      | box    | 2 / | 25.00     | 50.00        | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |
| *    | Photo paper (A4, Plain Deck)    | pack   | 5 / | 180.00    | 900.00       | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |
| *    | Record book 500 lvs             | pcs    | 1 / | 400.00    | 400.00       | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |
| *    | Stamp pad ink                   | bottle | 1 / | 250.00    | 250.00       | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |
| *    | Stamp pad, felt pad #2          | pcs    | 1 / | 200.00    | 200.00       | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |
| *    | Correction tape 6m x 5 mm       | pcs    | 4 / | 45.00     | 180.00       | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |
| *    | Coupon bond short subs 20       | ream   | 9 / | 240.00    | 2,160.00     | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |
|      | TOTAL                           |        |     |           | 54,170.00    |                     |                                   |     |     |     |     |     |     |     |      |     |     |  |

TOTAL BUDGET:

54,170.00

Prepared By:

*John Edgar S. Anthony*  
JOHN EDGAR S. ANTHONY  
Dean, College of Computer Studies

Recommending Approval:

*Nemesio H. Davao*  
NEMESIO H. DAVAO, Ph.D.  
Vice President for Academic Affairs

MS, 928.91



PROJECT PROCUREMENT MANAGEMENT PLAN (PPMP)

END-USER UNIT - BS CpE Program  
Charged to STF - Faculty  
Project, Programs and Activities

| CODE | GENERAL DESCRIPTION                  | UNIT    | QTY  | UNIT COST | TOTAL AMOUNT | MODE OF PROCUREMENT | SCHEDULE/ MILESTONE OF ACTIVITIES |     |     |     |     |     |     |     |      |     |     |  |  |
|------|--------------------------------------|---------|------|-----------|--------------|---------------------|-----------------------------------|-----|-----|-----|-----|-----|-----|-----|------|-----|-----|--|--|
|      |                                      |         |      |           |              |                     | Jan                               | Feb | Mar | Apr | May | Jun | Jul | Aug | Sept | Oct | Nov |  |  |
|      | OFFICE SUPPLIES EXPENSES             |         |      |           |              |                     |                                   |     |     |     |     |     |     |     |      |     |     |  |  |
| • ✓  | Ballpen (black)                      | box     | 1 /  | 400.00    | 400.00       | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |  |
| • ✓  | Ballpen (red)                        | box     | 1 /  | 350.00    | 350.00       | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |  |
| • ✓  | Clear folder - long/green            | pcs     | 20 / | 30.00     | 600.00       | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |  |
| • ✓  | Coupon bond A4 s 24                  | ream    | 20 / | 450.00    | 9,000.00     | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |  |
| • ✓  | Coupon bond long s 24                | ream    | 30 / | 500.00    | 15,000.00    | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |  |
| • ✓  | Double-Sided Tapo                    | pcs     | 4 /  | 60.00     | 240.00       | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |  |
| • ✓  | Expanding envelop with garter (long) | pcs     | 10 / | 35.00     | 350.00       | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |  |
| • ✓  | Gel ballpen (black)                  | box     | 2 /  | 350.00    | 700.00       | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |  |
| • ✓  | Glue (240 g)                         | bottle  | 2 /  | 85.00     | 170.00       | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |  |
| • ✓  | Ink #003 Black                       | bottle  | 10 / | 450.00    | 4,500.00     | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |  |
| • ✓  | Ink #003 Cyan                        | bottle  | 10 / | 450.00    | 4,500.00     | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |  |
| • ✓  | Ink #003 Magenta                     | bottle  | 10 / | 450.00    | 4,500.00     | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |  |
| • ✓  | Ink #003 Yellow                      | bottle  | 10 / | 450.00    | 4,500.00     | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |  |
| • ✓  | Long Brown Envelope                  | pcs     | 25 / | 25.00     | 625.00       | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |  |
| • ✓  | Long Folder 100's                    | ream    | 1 /  | 800.00    | 800.00       | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |  |
| • ✓  | white bond marker, black             | pcs     | 10 / | 80.00     | 800.00       | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |  |
| • ✓  | whiteboard marker ink, black         | bottles | 10 / | 200.00    | 2,000.00     | Public Bidding      | ✓                                 |     |     |     |     |     |     |     |      |     |     |  |  |
|      | TOTAL                                |         |      |           | 49,035.00    |                     |                                   |     |     |     |     |     |     |     |      |     |     |  |  |

TOTAL BUDGET:

49,035.00

Prepared By:

Recommending Approval:

JOHN EDGAR S. ANTHONY  
Dean, College of Computer Studies

NEMESIO D. DAVALOS, Ph.D.,  
Vice President for Academic Affairs



# PROJECT PROCUREMENT MANAGEMENT PLAN (PPMP)

[illegible]

NEMESIO H. DAVALES, Ph.D.  
Vice President for Academic Affairs



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

PROJECT PROCUREMENT MANAGEMENT PLAN (PPMP)

END-USER UNIT : Student Affairs and Services- MBC  
Charged to STF : Students  
Project, Programs and Activities

| CODE | GENERAL DESCRIPTION                  | UNIT  | QTY | UNIT COST | TOTAL AMOUNT | MODE OF PROCUREMENT | SCHEDULE/MILESTONE OF ACTIVITIES |     |     |     |     |     |     |     |      |     |  |  |
|------|--------------------------------------|-------|-----|-----------|--------------|---------------------|----------------------------------|-----|-----|-----|-----|-----|-----|-----|------|-----|--|--|
|      |                                      |       |     |           |              |                     | Jan                              | Feb | Mar | Apr | May | Jun | Jul | Aug | Sept | Oct |  |  |
|      | OFFICE SUPPLIES                      |       |     |           |              |                     |                                  |     |     |     |     |     |     |     |      |     |  |  |
| •    | ballpen- (1-Gel GL 165) blk 12s      | box   | 1   | 350.00    | 350.00       | Public Bidding      | ✓                                |     |     |     |     |     |     |     |      |     |  |  |
| •    | ballpen- (1-Gel GL 165) blue 12s     | box   | 2   | 350.00    | 700.00       | Public Bidding      | ✓                                |     |     |     |     |     |     |     |      |     |  |  |
| •    | ballpen black                        | box   | 1   | 400.00    | 400.00       | Public Bidding      | ✓                                |     |     |     |     |     |     |     |      |     |  |  |
| •    | Certificate Holder (short)           | piece | 10  | 50.00     | 500.00       | Public Bidding      | ✓                                |     |     |     |     |     |     |     |      |     |  |  |
| •    | Clear Folder (long/green)            | piece | 30  | 30.00     | 900.00       | Public Bidding      | ✓                                |     |     |     |     |     |     |     |      |     |  |  |
| •    | Coupon Bond A4 s 20                  | ream  | 8   | 230.00    | 1,840.00     | Public Bidding      | ✓                                |     |     |     |     |     |     |     |      |     |  |  |
| •    | Coupon Bond short subs 20            | ream  | 5   | 240.00    | 1,200.00     | Public Bidding      | ✓                                |     |     |     |     |     |     |     |      |     |  |  |
| •    | Expanding envelop with center (long) | piece | 50  | 35.00     | 1,750.00     | Public Bidding      | ✓                                |     |     |     |     |     |     |     |      |     |  |  |
| •    | Coupon Bond long subs 20             | ream  | 8   | 270.00    | 2,160.00     | Public Bidding      | ✓                                |     |     |     |     |     |     |     |      |     |  |  |
| •    | vellum board short                   | ream  | 1   | 500.00    | 500.00       | Public Bidding      | ✓                                |     |     |     |     |     |     |     |      |     |  |  |
| •    | Ink #003 (Black)                     | bot   | 3   | 450.00    | 1,350.00     | Public Bidding      | ✓                                |     |     |     |     |     |     |     |      |     |  |  |
| •    | Ink #003 (Yellow)                    | bot   | 3   | 450.00    | 1,350.00     | Public Bidding      | ✓                                |     |     |     |     |     |     |     |      |     |  |  |
| •    | Ink #003 (Cyan)                      | bot   | 3   | 450.00    | 1,350.00     | Public Bidding      | ✓                                |     |     |     |     |     |     |     |      |     |  |  |
| •    | Ink #003 (Magenta)                   | bot   | 3   | 450.00    | 1,350.00     | Public Bidding      | ✓                                |     |     |     |     |     |     |     |      |     |  |  |
|      | TOTAL                                |       |     |           | 15,700.00    |                     |                                  |     |     |     |     |     |     |     |      |     |  |  |

TOTAL BUDGET:

15,700.00

2300.00 PPE P333

Prepared By:

Recommending Approval:

MADONNA F. MELGIOR, PhD  
Students Affairs and Services Coordinator

NEMESIO H. DAVALOS, PhD  
Vice President for Academic Affairs



## PROJECT PROCUREMENT MANAGEMENT PLAN (PMP)

[illegible]

Recommending Approval:

**JOHN EDGAR S. ANTHONY**  
Dean, College of Computer Studies

**NEMISIO H. DAVALOS, Ph.D.**  
Vice President for Academic Affairs



# PROJECT PROCUREMENT MANAGEMENT PLAN (PMP)

**END-USER UNIT - BS CPE Program**  
*Charged to STF - Curriculum*  
*Project, Programs and Activities*

[illegible]

19,713,91

**Recommending Approval:**

JOHN EDGAR S. ANTHONY  
Dean, College of Computer Studies

**NEMESIO H. DAVAROS, Ph.D.**  
Vice President for Academic Affairs



**Big enough, strong  
enough, and durable**



**LF Big Foldable Cabinet Durabox with Magnetic Suction**

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