

**Cooperative Development Authority**

**Cooperative Annual Performance Report (CAPR) Form**

**As of December 31, 20\_13\_\_**

|  |
| --- |
| **BOX 1: To be filled up by CDA Staff only** |
| Received by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Validated by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Validated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Encoded by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Encoded \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Verified/Reviewed by: \_\_\_\_\_\_\_\_\_\_\_\_\_ Date Verified/Reviewed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| --- | --- | --- | --- | --- | --- | --- | --- |
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| **INSTRUCTIONS TO COOPERATIVES** | | | | | |
| 1. The CAPR Form shall be uniformly used by **ALL COOPERATIVES**. | | | | | |
| 2. All blanks shall be filled-up with appropriate information. | | | | | |
| 3. The submission of the duly accomplished CAPR Form shall be done **ANNUALLY** within One Hundred Twenty (120) days after the end of the Calendar year. | | | | | |
| 4. Submission to CDA shall be done through registered mail, electronic mail or hand-carried to concerned CDA Extension Offices in accordance with Rule 8 IRR and MC No.2011-06.*The reports shall be typewritten or handwritten (print).* | | | | | |
| 5. The Accountant/Bookkeeper/Compliance Officer shall fill-up the CAPR Form. | | | | | |
| 6. The Chairman of the Board and General Manager shall certify to the truthfulness and correctness of the  information contained herein. | | | | | |
| 7. This form shall be submitted in three (3) copies; 1 for EO, 1 for CDS & 1 for coop. | | | | | |
|  | | | | | |
|  | | | | | |

**GENERAL INFORMATION**

1. Cooperative Identification Number (CIN): 0102070192

**B**. Name of Cooperative as of latest amendment: MACTAN ISLAND MULTIPURPOSE COOPERATIVE

**C**. Registration Number *(under RA 9520):*  9520-07000351

**D**. Date Registered**:**

Original Date of Registration: October 3, 2002

Registration Date under RA 9520: October 8, 2009

**E. Present Address of Cooperative:**

2ndFloor Bo-oc Virtudazo Bldg F. Martir, Street Lapu-Lapu City

**F. Category of Cooperative: Primary Secondary Tertiary**

x

**G. Type of Cooperative \_MULTI-PURPOSE**

**H. Business Activities:**

Financial Intermediation Education

Mining and Quarrying Agriculture, Hunting & Forestry

Construction Manufacturing

Transport, Storage & Communication Hotel & Restaurants

Real Estate, Renting & Business Activities Wholesale & Retail Trade; Repairs of Motor Vehicles, Motorcycles, and Personal & Household Goods

Health & Social Work Funeral

|  |
| --- |
| Fishing Others, Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Electricity, Gas & Water supplies

H1. Products/Commodities \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

H2. Services Rendered (please specify) LOANS

H3. Annual Volume of Business (Amount in Php): **25,566,257.53**

H3.a For Credit, Loans granted **22,785,488.85**

H3.b For Service, Gross receipt **35,114,626.63**

H3.c For Consumer/Marketing/Sales **2,780,768.68**

**I. Information on Number of Employees**

|  |  |  |  |
| --- | --- | --- | --- |
| **Number of Employees** | **Current Year** | | |
| **Male** | **Female** | **TOTAL** |
| Full-time |  | **4** | **4** |
| Part-Time |  |  |  |
| Total |  | **4** | **4** |
| Note: *In case of Workers Cooperative, all workers are considered direct employees of the cooperative.* | | | |

**J. Information on Number of Volunteer Workers**

|  |  |  |  |
| --- | --- | --- | --- |
| **Number of Volunteer Workers** | **Current Year** | | |
| **Male** | **Female** | **TOTAL** |
| Volunteer |  |  |  |
|  |  |  |  |
| **Note**: *Volunteers are members rendering services to the cooperative without salary.*  **K. Contact Person** | | | |
| a. Name : Ms. Bibiana P. Degamo | | | | |  |
| b. Designation: General Manager | | | | |  |
| c. Phone Number: 032-341-4150 | | | | | |
| d. Fax Number: 032-341-4150 | | | | | |
| e. Email Address: [bebiemactancoop@yahoo.com](mailto:bebiemactancoop@yahoo.com)  mactan\_island\_mpc@yahoo.com | | | | | |

**Website :www.mactanislandmpcoop.com**

**L. Information on Membership**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Particulars** | **For Primary** | | **For Secondary** | **For Tertiary** | Other Juridical Persons |
| Male | Female | Primary | Secondary |
| No. of Regular members | 208 | 438 |  |  |  |
| No. of Associate members |  |  |  |  |  |
| Total No. of Members | 208 | 438 |  |  |  |
| Target/Potential Membership | 35 | 85 |  |  |  |

L1. Membership Composition (Indicate Number)

|  |  |
| --- | --- |
|  |  |
| 1. Farmers \_\_\_\_\_\_\_\_\_\_\_\_\_ g. Indigenous People \_\_\_\_\_\_\_\_\_\_ 2. ARBs \_\_\_\_\_\_\_\_\_\_\_\_\_ h. Differently Abled/PWD \_\_\_1\_\_\_\_\_\_\_ 3. Fisherfolk \_\_\_\_69\_\_\_\_\_\_\_\_\_ i. Senior Citizen \_\_29\_\_\_\_\_\_\_ 4. OFWs \_\_\_\_4\_\_\_\_\_\_\_\_\_ j. Women \_\_\_\_\_\_\_\_\_\_ 5. Teachers \_\_\_\_71\_\_\_\_\_\_\_\_ k. Youth \_\_\_\_\_\_\_\_\_\_ 6. Rebel Returnees \_\_\_\_\_\_\_\_\_ l. Others, specify … drivers-61, Gov’t employees-5, Private-200 Self employed-160, Housewife-31 , Workers = 20   (*In case of residential membership there can be multiple entries*)  L2**.** Information on Cooperative Branches/Satellite Offices   |  |  | | --- | --- | |  | Numbers | | Branch Office |  | | Satellite Office |  | |  |  | |  |  |   L3**.** Details of Cooperative Branches/Satellites   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Address of Branch/Satellite** | **No. Members** | **Volume of Business (Php)** | **Paid Up Capital** | **Savings Generated** | |  | Male | Female |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **M. Certificate of Good Standing (CGS)** | |  | |  | | |  | | **Regular** | | **Special** | | | CGS NO. | | 13-0683 | |  | | | Date Issued | | May 2,2013 | |  | |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **N. Certificate of Tax Exemption/Ruling** | | |  |  | | | Date Issued | March 11,2011 | | | | Validity | 5 years - March 22, 2014 | | |   **O. Information on Savings Deposits**   |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  | | |  |  | |  | |  | |  | | **Type of Deposits** | **Regular Members** | | | **Associate Members** | | | | | | | **No. of Members with deposit accounts** | **No. of Accounts** | **Total Amount** | **No. of Members with deposit accounts** | | **No. of Accounts** | | **Total**  **Amount** | | | Savings deposits | 370 | 970 | 4,683,218.71 |  | |  | |  | | | Time deposits | 34 | 57 | 15,386,206.19 |  | |  | |  | | | Other types  Fixed deposits | 646 | 646 | 8,553,867.46 |  | |  | |  | | | **T o t a l** |  |  | 28,623,292.36 |  | |  | |  | |   **P. Information on Capitalization**   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | |  | **Common** | | **Preferred** | | | **Total** | | Authorized Capital | 10,000,000.00 | |  | | |  | | Subscribed Capital | 100,000.00 | |  | | |  | | Paid-up Capital | 8,553,867.46 | |  | | |  | | Deposit for Capital Subscription | 8,553,867.46 |  | |  |  |  | | Par Value per Share | 100.00 | |  | | |  | |  |
| **Q. Information on Statutory Reserves** |  |
| |  |  |  | | --- | --- | --- | |  | **Amount utilized for the year** | **Accumulated Balance** | | General Reserve Fund | 51,215.81 | 467,483.79 | | CETF |  |  | | Remitted to Federation/Union | 25,607.91 | 25,607.90 | | Retained amount |  |  | | Community Development Fund | 15,364.74 | 33,139.35 | | Optional Fund | 35,851.07 | 53,095.06 | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **R. Information on External Audit** |  |  |  |  |
|  |  |  |  |  |
| a.       Date of last audit: December 31, 2013 | | | | |
| b.       Period of Operation Covered by the last audit: January 1, 2013 to December 2013 | | | | |
| c. Name of external auditor: Mario R. Tamidles | | | | |

**S. Ratings**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| I. ***Social Audit*** | | | | |  |  |
|  | 1. Organization | | | |  | 14 |
|  | 2. Membership | | | |  | 34 |
|  | 3. Staff | | | |  | 10 |
|  | 4. Cooperation Among Cooperatives | | | | | 8 |
|  | 5. Community and Nation | | | | | 18 |
|  | 6. Network, Alliances & Linkages | | | | | 5 |
|  |  |  | **TOTAL** | |  | 89 |
| II. ***Performance Audit*** | | | | | |  |
|  | 1. Organizational Aspect | | | | |  |
|  | 2. Social Aspect | | | | |  |
|  | 3. Economic Aspect | | | | |  |
|  |  | 3a. Adequacy of Internal Control | | | |  |
|  |  | 3b. Financial Ratios | | | |  |
|  |  |  | 3b.1 **P**rofitability Performance |  | |  |
|  |  |  | 3b.2 **I**nstitutional Strength | | |  |
|  |  |  | 3b.3 **S**tructure of Assets | | |  |
|  |  |  | 3b.4 **O**perational Strength | | |  |
|  |  |  | **TOTAL** | |  |  |
|  |  |  |  |  |  |  |
| III. ***PESOS*** (*For Credit/Multipurpose with credit operations and segregated books of account )* | | | | | | |
|  | 1. **P**ortfolio Quality | | | |  |  |
|  | 1. **E**fficiency | | | |  |  |
|  | 1. **S**tability | | |  |  |  |
|  | 1. **O**perations | | | |  |  |
|  | 1. **S**tructure of Assets | | | |  |  |
|  |  |  | **TOTAL** | |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | \_\_\_\_\_\_\_\_\_\_\_\_MARIJANE M.FLORES\_\_\_\_\_\_\_\_ | | | | | | | | | |  | |  | | |  | | |
|  |  | | Position | | |  |  | | | |  | |  | | |  | | |
|  |  | | *Accountant* | | |  |  | | | |  | |  | | |  | | |
|  |  | | *Bookkeeper* | | |  |  | | | |  | |  | | |  | | |
|  |  | | *Compliance Officer* | | | |  | | | |  | |  | | |  | | |
| **Certified True and Correct:** | | | |  | | |  |  |  | | | | |  | | | |  | |  |
|  |  | |  | | |  |  | | | |  | |  | | |  | | |
|  | **\_\_\_\_\_\_\_BIBIANA P. DEGAMO\_\_\_\_\_** | | | | | | **\_\_\_\_\_\_CELSO M. CUMAYAS\_\_\_\_** | | | |  | |  | | |  | | |
|  |  | General Manager | | |  | | Chairman | | |  | |  | | |  | |