



COOPERATIVE DEVELOPMENT AUTHORITY

827 Aurora Blvd., Service Road, Brgy. Immaculate Conception, 1111 Cubao, Quezon City, Philippines

<http://www.cda.gov.ph> helpdesk@cda.gov.ph [CDA](#) [@CDAPhils](#) [PH Cooperatives](#)



MEMORANDUM CIRCULAR NO. 2020-09

Series of 2020

TO : ALL CONCERNED

SUBJECT : GUIDELINES FOR ACCREDITATION OF COOPERATIVE BENEFICIARIES OF CDA-ADMINISTERED GRANTS AND DONATIONS INVOLVING PUBLIC FUNDS AND PROPERTIES

Section 1. Title

This Memorandum Circular shall be known as the “Guidelines for Accreditation of Cooperative Beneficiaries of CDA-Administered Grants and Donations involving Public Funds and Properties”

Section 2. Legal Bases

The legal bases are the following:

1. Article II, Section 9 of the 1987 Philippine Constitution, states that:

“The State shall promote a just and dynamic social order that will ensure the prosperity and independence of the nation and free the people from poverty through policies that provide adequate social services, promote full employment, a rising standard of living and an improved quality of life for all.”

2. Section 2 of Republic Act No. 11364, otherwise known as An Act Reorganizing and Strengthening the Cooperative Development Authority, Repealing for the Purpose Republic Act No. 6939, creating the Cooperative Development Authority, states that:

“It is hereby the declared policy of the State to promote the viability and growth of cooperatives, as instruments of equity, social justice and economic development xxx”.

3. Section 4 (m) of Republic Act No. 11364, states that the Authority shall have the following powers and functions:

Office of the Chairman : (02) 721-5325
(02) 721-5324

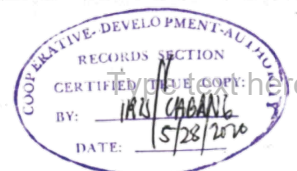
Office of the Executive Director : (02) 725-6450
Officer of the Day : (02) 725-3764



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xxx

“(m) Administer all grants and donations exclusively intended for cooperatives coursed through the Authority for cooperative development, xxx”.

4. Section 71 (c) of Republic Act No. 11260, General Appropriations Act of 2019 states that:

“The government agency has accredited the CSO [Civil Society Organization] in accordance with its guidelines. The guidelines shall include, as a minimum, the following requirements”

xxx

“In case of a cooperative who wishes to become a CSO partner, the submission of certificate of registration and certificate of compliance as issued by the Cooperative Development Authority specifically for that purpose including meeting the minimum requirements as stated herein shall be sufficient for it to qualify as a CSO partner.”

5. Section 2 of Presidential Decree No. 1445, Ordaining and Instituting a Government Auditing Code of the Philippines, states that:

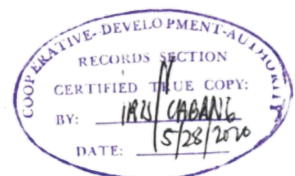
“It is the declared policy of the State that all resources of the government shall be managed, expended or utilized in accordance with law and regulations, and safeguard against loss or wastage through illegal or improper disposition, with a view to ensuring efficiency, economy and effectiveness in the operations of government, xxx”

6. Section 4.5.2 of the Commission on Audit (COA) Memorandum Circular (MC) No. 2007-01, states that:

“For each project proposal, the GO [Government Organization] shall accredit the [Non-Government Organization/Peoples’ Organization] NGO/PO project partners through the Bids and Awards Committee (BAC), or a committee created for the purpose, xxx”

7. Section 2.1 Release of Funds. “Documentary Requirements” of COA MC No. 2012-001 states as one of the requirements:

“Accreditation of the NGO/PO by the Bids and Awards Committee (BAC) of the grantee agency”



8. Article VI Section 11 of Republic Act No. 11054, otherwise known as An Act Providing for the Organic Law for the Bangsamoro Autonomous Region in Muslim Mindanao, states that:

“Section 11. Bangsamoro Participation in National Government. As far as practicable, the Bangsamoro Government shall be represented in the department offices, commissions, agencies and bureaus of the National Government that implement and enforce policies, programs, and projects of the National Government in the Bangsamoro Autonomous Region.”

Section 3. Scope

This Guidelines shall cover all types and categories of CDA-registered cooperatives and registered cooperatives in the BARMM area applying, as beneficiaries, for all CDA-Administered grants and donations, involving public funds and properties, subject to applicable provisions of Republic Act No. 11364 and its Implementing Rules and Regulations (IRR) and other laws, rules and regulations.

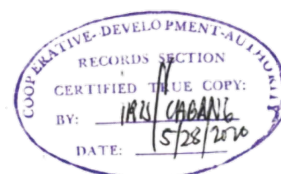
Section 4. Purposes

This Guidelines shall serve as guidance for all types and categories of cooperatives to apply as CDA-accredited cooperative beneficiary for CDA-Administered grants and donations, involving public funds and properties.

Section 5. Definition of Terms

For purposes of this Guidelines, the following terms, shall mean:

- a. **Accreditation**—refers to the process of recognizing duly-registered cooperatives as qualified beneficiaries of CDA-Administered grants and donations involving public funds and properties.
- b. **Accrediting Body**—refers to the CDA Bids and Awards Committee (BAC) of Central, or Extension Offices, as the case may be, who has the authority to accredit cooperatives applying as beneficiaries of CDA-Administered grants and donations involving public funds and properties.
- c. **Authority**—refers to the Cooperative Development Authority (CDA).
- d. **Certificate of Accreditation** (as Cooperative Beneficiary Applicant)— refers to a certificate issued by the Cooperative Development Authority (CDA) through the Accrediting Body created for the purposes of this Guidelines.
- e. **Cooperative**—refers to an autonomous and duly registered association of persons, with a common bond of interest, who have voluntarily joined together to achieve their social, economic and cultural needs and aspirations making equitable contributions to the capital required, patronizing their products and services and accepting a fair share of



the risks and benefits of the undertaking in accordance with universally accepted cooperative principles.

- f. **Cooperative Beneficiary Applicant** –refers to a CDA-registered cooperative of any type and category, who in written communication, has signified and explicitly expressed its willingness to undergo accreditation as, or may be, an additional requirement in his other application as a potential beneficiary of CDA-administered grants and donations involving public funds and properties.

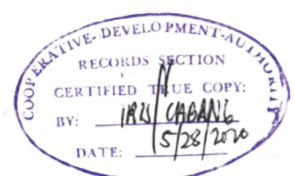
Section 6. Certificate of Accreditation

The Certificate of Accreditation (as a cooperative beneficiary applicant) is issued to duly-registered cooperatives as one of the documentary requirements for the grant of CDA-administered grants and donations involving public funds and properties. This is not intended for any individual member's use as a potential beneficiary.

Section 7. Requirements for Accreditation Application

All duly registered cooperatives, which have signified in writing and explicitly expressed its willingness to apply for accreditation as beneficiary applicants of CDA-administered grants and donations involving public funds and properties must comply with the following requirements:

1. Certificate of Registration
2. Valid Certificate of Compliance
3. Audited Financial Statements for the past three years preceding the date of project implementation. For cooperatives which have been in operation for less than three (3) years, report of accomplishment or any equivalent proof certified by its President/Chairman and Secretary that it had previously implemented similar projects shall be required, in addition to the financial reports for the years it has been in operation.
4. Duly accomplished and duly sworn Cooperative Beneficiary Accreditation Application Form
5. Proof of organization, namely:
 - a. Organizational Chart or Governance Structure; and
 - b. Date of cooperative registration, list of officers and members with their complete names, date of birth (if known and registered), complete address, and contact numbers, if available
6. Certificate of Good Standing (Form No. 03-A in this memorandum circular), or in the absence thereof, any other proof coming from other government agencies that such cooperative has liquidated, in accordance with government accounting and auditing rules and regulations, all funds transfer due for liquidation. If the cooperative Applicant has received public funds prior to its application, a certificate of good



standing from the government agency or agencies from which it has received such public funds, specifically stating that the cooperative has liquidated, in accordance with COA regulations, all fund transfers due for liquidation;

7. A sworn affidavit of the Secretary of the cooperative that none of its cooperators, organizers, directors, or officials is an agent of, or related by consanguinity or affinity, up to the fourth civil degree, to the officials of the Authority authorized to process and/or approve the accreditation, the MOA and the release of funds. Relationship of this nature shall automatically disqualify the cooperative applicant from being accredited;
8. Proof of having undergone Social Preparation from the Authority;
9. Other accomplished forms attached to this Guidelines, as applicable to cooperative-applicants; and
10. Pertinent documents as may be later on deemed necessary by the Accrediting Body.

Section 8. Social Preparation

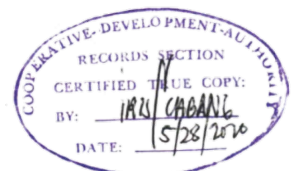
For every program or project to be implemented by the Authority, a social preparation shall be conducted. Needs Assessment and Evaluation of the proposed programs and projects should be made in consultation with the partner and/or cooperative beneficiary. The Authority will also be visiting the cooperative applicant using tools for verification/validation which shall cover, as minimum, the cooperative's area of operation, organization & membership, documents submitted, among others.

Section 9. Procedure for Accreditation

- a. Prospective beneficiary applicant shall apply for accreditation in the CDA Central, or concerned Extension Offices having jurisdiction over the cooperative.
- b. The CPDAD of CDA Central Office, or CPDAS of concerned Extension Office, shall process/evaluate the application in accordance with the approved Guidelines.
- c. The CDA Bids and Awards Committee (BAC) of Central Office, or concerned Extension Offices, shall approve or disapprove the application for accreditation.
- d. Once approved by the CDA BAC, CPDAD/CPDAS shall prepare the Certificate of Accreditation for signature of the BAC Chairman.

If the accreditation involve cooperatives registered by the appropriate office in BARMM, the process of accreditation should be in partnership with the CDA Extension Office concerned and appropriate office in BARMM as co-partners in the accreditation procedure.

Additional documents may be required by the appropriate office in BARMM in applying for accreditation, such as Certificate of Registration and Certificate of Compliance. Once these are complied with, duly signed, and formally transmitted by the latter to the Authority, through its Extension Office, the application shall be processed by the latter.



Section 10. Validity of the Certificate of Accreditation

The Certificate of Accreditation, as a cooperative beneficiary applicant, shall be valid for a period of two (2) years, specific to the PPA which the cooperative is applying for as a beneficiary, from date of issuance unless revoked sooner by the Authority.

Section 11. Renewal of Accreditation

A CDA-accredited cooperative beneficiary applicant may apply for renewal of its Certificate of Accreditation with the Authority within sixty (60) working days prior to the expiration of its Certificate. Upon receipt of such application, the Authority shall proceed to process the application, applying Sections 7 and 9 of this Guidelines.

The Authority shall circularize the list of accredited cooperative beneficiary applicants periodically through its website. The Authority, however, shall not be held liable for any damage or loss that may arise from the accredited cooperative's application status in the selection, identification, validation, qualification, verification, endorsement, registration, approval as beneficiary in other GO/NGO/PO/CSO-Administered grants, donations, assistance, programs, projects and activities (PPAs) involving public funds and properties.

Section 12. Revocation of Accreditation

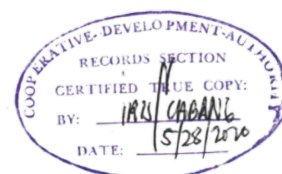
The Certificate of Accreditation may be revoked any time, after due process, on any of the following grounds:

1. Misrepresentation in, or falsification of, any document pertaining to its accreditation, whether first time or renewal;
2. Failure of the beneficiary cooperative, during the validity period of the Certificate of Accreditation, to comply with the terms of reference/provisions/deliverables stated on an agreement with the Authority involving the transfer of CDA funds, including default or delay in liquidating of CDA-Administered grants, donations, assistance, programs, projects and activities (PPAs) involving public funds and properties;
3. Violation by the beneficiary cooperative, during the validity period of the Certificate of Accreditation, of any law, rule, or regulation involving the utilization of CDA-Administered grants, donations, assistance, programs, projects and activities (PPAs) involving public funds and properties;
4. Any violation of this Guidelines; and
5. Other willful acts or circumstances analogous to the forgoing.

Section 13. Effects of Revocation

For purposes of this Guidelines, the following are the sanctions imposable by the Authority to the applicant or accredited cooperative beneficiary:

1. A cooperative beneficiary whose Certificate of Accreditation is revoked for the first time shall not be eligible to apply for accreditation for a period of two (2) years from the date of revocation;



2. If the ground for revocation is misrepresentation, falsification, or violation of law, rules and regulations involving the utilization of CDA funds or any CDA-Administered grants, donations, assistance, programs, projects and activities (PPAs) involving public funds and properties, the cooperative beneficiary shall be disqualified from applying for accreditation;
3. A cooperative beneficiary whose Certificate of Accreditation is revoked for the second time, for grounds other than those enumerated under item No. 2 of this Section, shall be disqualified from applying for accreditation; and
4. Any other cases analogous to the foregoing.

The foregoing provisions shall be without prejudice to any other legal action that may be filed against the applicant or accredited cooperative beneficiary, and/or any or all of its organizers, officers, or members.

Section 14. Separability Clause

If, for any reason, any part or provision of this Guidelines is declared null and void or unconstitutional, the other provisions not affected thereby shall continue to be in force and effect.

Section 15. Effectivity

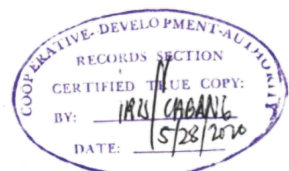
This Guidelines shall take effect fifteen (15) days following the approval of the Board of Directors and the filing thereof to the Office of the National Administrative Register (ONAR).

Approved by the CDA Board of Directors under Resolution, No. **055, S-2020** dated **February 25, 2020**.

For the Board of Directors

By:


ORLANDO R. RAVANERA, CSEE, CEO VI
Chairman 



FORM No. 01: ACCREDITATION APPLICATION FORM

for the Accreditation of Cooperative as a Beneficiary Applicant of CDA-Administered Grants, Donations,
Assistance, Programs, Projects and Activities
involving Public Funds and Properties

Complete Name of Cooperative: _____

New Applicant	
Renewal	

CDA Accreditation Number, if Renewal _____

Complete Mailing Address of the Cooperative		
Contact Person	Name	
	Designation	
Contact Information	Landline/Fax No.	
	Mobile No.	
	E-mail Address	
Date of Registration		
Affiliation, if any		

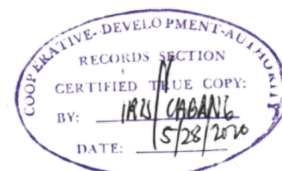
Has the cooperative received funds from the government and/or private agencies within the past three (3) years?

Where appropriate, put Check Mark (✓) in the box if there is an evident presence of an attribute. If the item requires a specific answer, spell it out and clearly.

	Yes (Please fill-out Form No. 03-A and 03-B (List of Completed and On-Going Grants/Donations/Assistance/PPAs))
	No (Do not fill-out Form No. 03-B)

Organizational Structure: *(use additional sheet of paper, if necessary)*

Location Sketch/Geographical Map Location of the Principal Office of the Cooperative
(pls. attach photographs of façade and the interiors of the office in another sheet of paper)



Name of Program, Projects/Activities (PPAs) the cooperative wants to be a beneficiary of	
--	--

I do hereby certify the following:

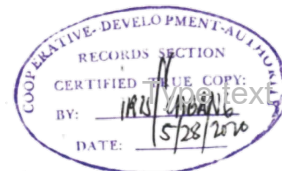
1. That, the cooperative has authorized the application for accreditation, and has authorized the person actually filing the application to represent the cooperative in the application;
2. That, all the supporting required and/or additional documents are authentic, true and correct;
3. That, none of the members of the cooperative has been convicted in any case, or is currently a defendant/accused/respondent in any pending case, related to the use of public funds;
4. That, the cooperative is aware of, understand and agrees to abide by the guidelines for accreditation of cooperative; and
5. That, neither the cooperative nor any of its members/s has been blacklisted by any government agency.

Further,

1. Authorize the CDA to inspect the premises of the office as well as the site of any past of present PPAs of the cooperative;
2. Authorize any concerned person to disclose to the CDA any fact material to the validation of any information provided by the cooperative applicant in this application form or in any of the documents submitted in support thereof

I HEREBY DECLARE UNDER THE PENALTIES OF PERJURY THAT THE FOREGOING ATTESTATIONS ARE TRUE AND CORRECT

AFFIANT- Authorized Representative	Signature		
	Name		
	Position/Designation		
Date Executed		Place Executed	
SUBSCRIBED AND SWORN to before me, on the above date and place, affiant exhibiting the following identification document:			
Government ID Type			
Government ID No.			
Place and Date of Issue			
Valid Until			
Doc. No.	Signature		
Page No.	Name of Notary Public		
Book No.	Address		
Series of	Commission Valid Until		



FORM No. 02: LISTS OF OFFICERS AND MEMBERS FORM

As of _____
 (Updated within 6 months prior to application)

Name of Coop:	
Coop Address:	

Names of Officers	Position/Title	Home Address	Contact Number/s
1.			
2.			
3.			
Names of Members	Home Address		Contact Number/s
1.			
2.			
3.			

- Note:
- Please use additional sheet/s, if necessary. Readjust the orientation view of this document from "Portrait" to "Landscape" as may be necessary
 - Photocopy of any government-issued IDs of the Officers must be attached
 - If Members has no contact number, indicate reasons why there is no contact number

 Name over Signature of Coop's Secretary

 Date Signed



FORM No. 03-A: CERTIFICATE OF GOOD STANDING
 (AS RECIPIENT OF GOVERNMENT-ADMINISTERED AND FACILITATED GRANTS AND DONATIONS)

NOTE: THIS FORM MUST BE NOTARIZED

Direction: For cooperatives who was a beneficiary of government-administered grants, donations, assistance, programs, projects and activities (PPAs) involving public funds and properties. If there are no PPAs being implemented by the cooperative, do not submit Form 03-B

This is to certify that:

- (Name of Cooperative), with office address at _____ is an active partner of CDA since (period of partnership);
- the following are the grants/donations/assistance/PPAs implemented or is/are being implemented by the said cooperative received from government agency/ies:

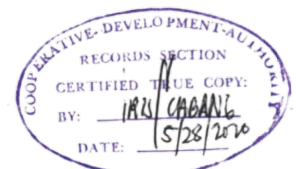
Name of Government Agency	Fund Transferred Amount	Date Started	Date Ending
1.			
2.			
3.			
4.			

Note: - Please use additional sheet/s if necessary Readjust the orientation view of this document from "Portrait" to "Landscape" as may be necessary
 - If there are no PPAs being implemented by coop, please fill all the blank with "N.A."

The cooperative has liquidated, and has been cleared from all of its accountabilities to the government agencies mentioned above, in accordance with Commission on Audit (COA) regulations, all fund transfers for liquidation.

 Signature over printed name of the
 Head or Authorized Representative of the
 Cooperative Applicant

 Date signed



FORM No. 03-B: LIST OF COMPLETED AND ON-GOING GRANTS/DONATIONS/ASSISTANCE/PPAS

In Partnership with Government Agencies (From Year _____ to Year _____)								
Title of PPA	Description of the PPA	Beneficiary Areas (where implemented)	Name of the Sponsor/Office	Total Amount Received	Unliquidated Amount of the Funds received	Coop Funding Counterpart	Date Started	Date Completed
Completed								
1.								
2.								
3.								
Ongoing								
1.								
2.								
3.								
4.								

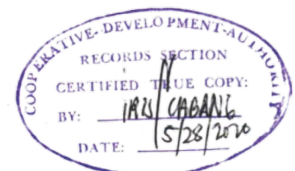
In Partnership with Private/Non-Government Agencies (From Year _____ to Year _____)								
Title of PPA	Description of the PPA	Beneficiary Areas (where implemented)	Name of the Sponsor/Office	Total Amount Received	Unliquidated Amount of the Funds received	Coop Funding Counterpart	Date Started	Date Completed
Completed								
1.								
2.								
3.								
Ongoing								
1.								
2.								
3.								
4.								

- Note:
- Covered Period for the past three (3) years prior to its accreditation application date.
 - Please use additional sheet/s if necessary. Readjust the orientation view of this document from "Portrait" to "Landscape" as may be necessary
 - Some portions of this Form may be modified according to its applicability
 - If there are no PPAs being implemented by coop, fill the appropriate blanks with "N.A."

 Signature over printed name of the
 Head or Authorized Representative of the
 Cooperative Beneficiary Applicant

 Signatory Designation

 Date signed



(Enter CDA concerned Office Letterhead)

**FORM No. 04: COOPERATIVE
TECHNICAL AND FINANCIAL MATURITY
ASSESSMENT FORM**

A. BASIC INFORMATION

A.1. Cooperative Profile

Name of Coop _____
Coop Address _____
Coop Type _____
Coop Category _____
Contact Person _____
Tel No _____
Cell No _____
Email Add _____

A.2. Cooperative Status

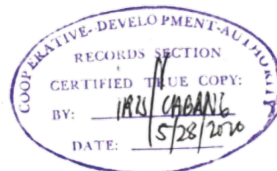
Where appropriate, put Check Mark (✓) in the box if there is an evident presence of an attribute. If the item requires a specific answer, spell it out and clearly.

<input type="checkbox"/>	Reporting
<input type="checkbox"/>	Non-reporting
<input type="checkbox"/>	Newly Registered

B. TECHNICAL CAPACITY INFORMATION

Direction: Please provide brief assessment on the following aspects:

B.1. Manpower



B.2. Technical Expertise

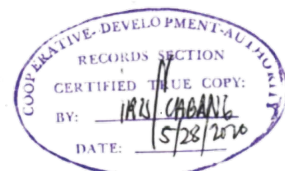
B.3. Existing Properties/Facilities of Cooperative

Direction: Kindly answer the following fields by providing the necessary information

B.1. Manpower

B.1.1. Coop Operations Staff				
POSITION	NAME	STATUS OF APPOINTMENT	MINIMUM EDUCATION EXPERIENCE/ TRAINING	MONTHLY COMPENSATION
Manager				
Accountant				
Bookkeeper				
Cashier				
Collector				
Sales Clerk				
Others:				

Note: Please use additional sheet/s if necessary Readjust the orientation view of this document from "Portrait" to "Landscape" as may be necessary.
Status of Appointment may refer to as: Permanent, Contractual, Full-time, Part-time, Volunteer, etc.



B.1.2. Cooperative Membership Structure

SECTOR BEING REPRESENTED	NUMBER OF REGULAR MEMBERS	NUMBER OF ASSOCIATE MEMBERS
Agrarian Reform Beneficiaries		
Barangay officials and employees		
Driver / Operators / Conductors		
Differently Abled Person/PWD		
Elderly/Senior Citizen		
Entrepreneurs		
4Ps Beneficiaries		
Farmers		
Fishermen/fisherfolks/fish vendors		
Government employees and officials		
Housewives/Househusbands		
Livestock growers		
Indigenous People, pls. specify _____		
Informal Settlers		
Military Personnel		
Non-uniformed Military Personnel		
Miners		
Teachers/Educators		
Non-teaching personnel		
Overseas Filipino Workers		
Private Employees		
Professionals, Pls. specify:		
Rebel Returnees		
Religious Sector/Worker		
Retired Employees/Retirees		
Seaman/Seafarers		
Self-employed, pls. specify nature		
Skilled workers, pls. specify		
Students		
Vendors		
Others, Pls. specify: _____		

Note: Please use additional sheet/s if necessary Readjust the orientation view of this document from "Portrait" to "Landscape" as may be necessary.



B.2. Technical Expertise

B.2. Acquired Skills/Expertise		
B.2.1. Deliverables/Objects/ Items of the PPA applying/asking for	B.2.2. Title of Relevant Capacity-Building Interventions Received/Attended	B.2.3. Estimated Duration of Capacity-Building Activity (in Hours)

Note:

This matrix estimates if the cooperative has gained enough capacity-building interventions that may warrant the sustainability of the assistance being extended to the cooperative.

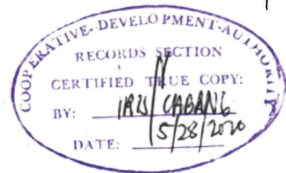
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Deliverables of the PPA means all the items/objects/account title where the cooperative is asking/applying for and is expected to received

Capacity-building activities, received/attended at least five (5) years from the time of accomplishing this Form, that are in relation/applicable to deliverables of the PPA where the cooperative is applying for. It refers to the process by which individual-members and cooperatives obtain, improve, and retain the skills, knowledge, tools, equipment and other resources needed to do their jobs competently or to a greater capacity (larger scale, larger audience, larger impact, etc).

B.3. Existing Properties/Facilities of Cooperative

B.3. Existing Properties/Properties of Cooperative	
Where appropriate, put Check Mark (✓) in the box if there is an evident presence of an attribute. If the item requires a specific answer, spell it out and clearly.	
<input type="checkbox"/> Typewriter/s, how many:	<input type="checkbox"/> Water Connection
<input type="checkbox"/> Laptop Computer/s, how many:	<input type="checkbox"/> Electric/Power Connection
<input type="checkbox"/> Desktop Computer/s, how many:	<input type="checkbox"/> Processing/Production Facility
<input type="checkbox"/> Passenger Car/s, how many:	<input type="checkbox"/> Medical Instrument/s
<input type="checkbox"/> Delivery Truck/s, how many:	<input type="checkbox"/> Ambulance/Human Health vehicle
<input type="checkbox"/> Motor Banca/s, how many:	<input type="checkbox"/> Skills/Training Facility
<input type="checkbox"/> Refrigerator/s, how many:	<input type="checkbox"/> Maintenance and Repair Shop
<input type="checkbox"/> Mobile Phone/s, how many:	<input type="checkbox"/> Tech & Research Facility
<input type="checkbox"/> Landline Phone/s, how many:	<input type="checkbox"/> Recreation/Sports Facility
<input type="checkbox"/> Printer/s, how many:	<input type="checkbox"/> Health/Wellness/Rehab Clinic
<input type="checkbox"/> LCD Projector/s, how many:	<input type="checkbox"/> Warehouse/Storage Facility
<input type="checkbox"/> Tables and Chairs/s, how many:	<input type="checkbox"/> Milling House/Facility
<input type="checkbox"/> Air Condition Unit/s, how many:	<input type="checkbox"/> Farm Equipment
<input type="checkbox"/> Filing Cabinet/s, how many:	<input type="checkbox"/> Post-Harvest Facility
<input type="checkbox"/> Fishing Equipment	<input type="checkbox"/> Solar Dryer
<input type="checkbox"/> Internet Connection	<input type="checkbox"/> Marketing Facility



	Vault/Safety Deposit Box, how many:		Laboratory Room/Facility

Note: - Please use additional sheet/s if necessary Readjust the orientation view of this document from "Portrait" to "Landscape" as may be necessary

C. FINANCIAL INFORMATION

C.1. Cooperative Business Engagement Activities	
Business Name/Type	Estimated Volume of Transaction (based on its derived sales, in Pesos)

Note: - Please use additional sheet/s if necessary Readjust the orientation view of this document from "Portrait" to "Landscape" as may be necessary

C.2. Financial Report (from immediately preceding fiscal year)	
	(in Pesos)
Total Assets	
Total Liabilities	
Net Worth	
Net Surplus	

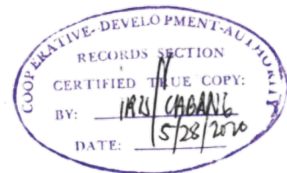
Note: - Please use additional sheet/s if necessary Readjust the orientation view of this document from "Portrait" to "Landscape" as may be necessary

Approved by:

Signature over printed name of the
CDA-EO Director

Signatory Designation

Date signed



(Insert CDA Concern Office's Letterhead)

Certificate No. YYYY-000

Status NEW (or RENEWAL)

This

CERTIFICATE OF ACCREDITATION

is issued to

NAME OF COOPERATIVE BENEFICIARY APPLICANT

CDA-Registration Number

Coop Declared Mailing Address

for additional requirement as a beneficiary applicant of

Name of Specific Program or Project

of the

Name of the Agency/Office providing the Program or Project

for the period

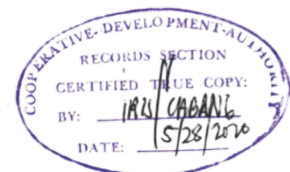
Specific Date/Duration of the Specific Program or Project

Given this XX day of (month), (year) in (Exact Place).

This Certificate shall remain valid two (2) years from the issuance date as indicated above,
unless revoked sooner by the CDA.

Signature over Printed Name

Chairperson, CDA Bids and Awards Committee
CDA XXX Extension Office





COOPERATIVE DEVELOPMENT AUTHORITY

827 Aurora Blvd., Service Road, Brgy. Immaculate Conception, 1111 Cubao, Quezon City, Philippines
http://www.cda.gov.ph helpdesk@cda.gov.ph CDA @CDAPhils PH Cooperatives



EXCERPTS FROM THE MINUTES OF THE 2nd REGULAR MEETING OF THE CDA BOARD OF DIRECTORS HELD ON FEBRUARY 25, 2020 QUEZON CITY

PRESENT:

- | | |
|-------------------------------|------------------------------|
| Usec. Orlando R. Ravanera | - Chairman/Presiding Officer |
| Asec. Abdulsalam A. Guinomla | - Board of Director |
| Asec. Abad L. Santos | - Board of Director |
| Asec. Myrla B. Paradillo | - Board of Director |
| Asec. Vidal D. Villanueva III | - Board of Director |
| Asec. Pendatun B. Disimban | - Board of Director |
| Asec. Virgilio R. Lazaga | - Board of Director |

ALSO PRESENT:

- | | |
|--------------------|----------------------|
| Mr. Ray R. Elevazo | - Executive Director |
|--------------------|----------------------|

RESOLUTION NO. 055, S-2020

Upon motion by Asec. Pendatun B. Disimban, duly seconded by Asec. Abdulsalam A. Guinomla, be it RESOLVED as it is hereby RESOLVED, to approve the proposed Guidelines for CDA-Registered Cooperatives' Accreditation as Beneficiary Applicant of CDA-Administered Grants and Donations Involving Public Funds and Properties.

UNANIMOUSLY APPROVED.

XXX

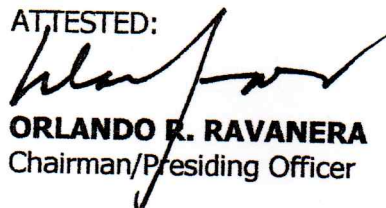
XXX

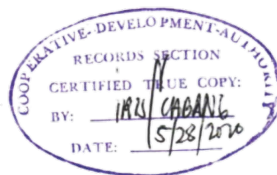
XXX

This is to certify that the foregoing is true and correct from the minutes of the CDA Board of Directors' Regular Meeting.


JULIO E. CASILAN, JR.
Acting Board Secretary

ATTESTED:


ORLANDO R. RAVANERA
Chairman/Presiding Officer



Office of the Chairman : (02) 721-5325

: (02) 721-5324

Office of the Executive Director : (02) 725-6450

Officer of the Day : (02) 725-3764



Management System
ISO 9001:2015

