

Payment Form

BIR Form No.

0605

September 2003(ENCS)

1 For the <input checked="" type="radio"/> Calendar <input type="radio"/> Fiscal		3 Quarter <input type="radio"/> 1st <input type="radio"/> 2nd <input type="radio"/> 3rd <input type="radio"/> 4th		4 Due Date (MM/DD/YYYY) 01 31 2022		5 No. of Sheets Attached 0		6 ATC MC180	
2 Year Ended (MM/YYYY) 12 - December 2022									
7 Return Period (MM / DD / YYYY) 12 31 2022				8 Tax RF					

Part I

Background information

9 Taxpayer Identification No.		10 RDO Code		11 Taxpayer Classification		12 Line of Business/Occupation	
495 331 376 000		54A		Ⓢ I ○ N		RETAIL PHARMACEUTI	
13 Taxpayer's Name (Last Name, First Name, Middle Name for Individuals) /(Registered Name for Non-Individuals)						14 Telephone Number	
MONTEMAR, HELEN RAPAL						09289747542	
15 Registered Address						16 Zip Code	
BLK 3 LOT 9 BRGY VICTORIA REYES, DASMARINAS CITY, CAVITI						4114	
17 Manner of Payment						18 Type of Payment	
Voluntary Payment			Per Audit/Delinquent Account			○ Installment	
○ Self-Assessment			○ Preliminary/Final Assess/Deficiency Tax			No. of Installment	
○ Penalties			○ Accounts Receivable/Delinquent Account			○ Partial Payment	
○ Tax Deposit/Advance Payment						Ⓢ Full Payment	
○ Income Tax Second Installment(Individual)							
Ⓢ Others(Specify)							
RENEWAL REG FEE 2022							

Part II

Computation of Tax

19	Basic Tax/Deposit/Advance Payment	19	500.00
20	Add: Penalties		
	Surcharge		
	Interest		
	Compromise		
20A	0.00	20B	0.00
20C	0.00	20D	0.00
21	Total Amount Payable(Sum of items 19 & 20D)	21	500.00

☐ Pre-approved by Investigating Office☐ Not approved by Investigating Office

<p align="center">For Voluntary Payment</p> <p>I declare, under the penalties of perjury, that this document has been made in good faith, verified by me, and to the best of my knowledge and belief, is true and correct, pursuant to the provisions of National Internal Revenue Code, as amended, and the regulations issued under authority thereof.</p> <p>22A <u>Helen R. Montan</u> Signature over Printed Name of Taxpayer/Authorized Representative</p> <p>_____ Title/Position of Signatory</p>	<p align="center">For Payment of Deficiency Taxes — From Audit/Investigation/ Delinquent Account</p> <p>APPROVED BY:</p> <p>22B _____ Signature Over Printed Name of Head of Office</p>	<p align="center">Stamp of Receiving Office and Date of Receipt</p>
--	---	---

Part III Details of Payment

Particulars	Drawee Bank/Agency	Number	MM	DD	YYYY	Amount
Cash/Bank						23
Debit Memo						▶
24A	24B	24C				24D
Check						▶
Tax Debit Memo	25A	25B				25C
						▶
26A	26B	26C				26D
Others						▶

Machine Validation/Revenue Official Receipt Details (If not filed with the bank)

Key Classification: I - Individual N - Non-Individual

DEVELOPMENT BANK OF THE PHILIPPINES

RECEIVED
JAN 26 2022



Development Bank of the Philippines

BIR TAX PAYMENT DEPOSIT SLIP

Date: Jan. 26, 2022

Account Name: BTR-BIR		CASH PAYMENT				CHECK PAYMENT				
Account No. 0405-027020-080		Denomination	No. of Pes.	Amount Pesos	Cvs.	Bank Initial	Branch	Check Number	Amount Pesos	Cvs.
Taxpayer Name: MONTENAN, Helen R.		1000.00								
TIN: 495 391 876 Tax Type: RF		500.00	1	500						
Tax Period: DEC 2022 Tax Form: 0605		200.00								
<input checked="" type="checkbox"/> Cash		100.00								
<input type="checkbox"/> Check		50.00								
<input type="checkbox"/> Bank Debit Memo:		20.00								
<input type="checkbox"/> Savings Account #		10.00								
<input type="checkbox"/> Current Account #		Coins								
Tax Debit Memo (TDM):		Total Cash Payment 500.00				Total Check Payment				
Number:		INSTRUCTIONS								
Amount:		1. To be accomplished in 3 copies distributed as follows: Original - Taxpayer's copy, Duplicate - Teller's copy, Triplicate - to be attached to the Return.								
Date:		2. In case of partial payment thru TDM, check the appropriate boxes (TDM, Cash or Check). A photocopy of the Tax Credit Certificate (TCC), front and back page, which was the source of the TDM, together with a copy of the TDM must be required from the taxpayer and attached to the TDM.								
Total Amount: Five hundred pesos		3. This deposit slip shall be used exclusively in payment of taxes and Revenue Taxes.								
(P 500.00)		4. This deposit slip is not valid without machine validation and initial of the teller.								
Signature of Taxpayer/Representative:		5. Taxpayer may confirm their Tax payment with their Home or Office or any branch where they are required to file tax returns/payment form and pay internal taxes.								
		MACHINE VALIDATION:								
		Date : 01/26/22 09:10								
		Acct No: ISN: 10								
		Amount : PHP *****500.00 DBP :DBP Dasmarias 0650								
		Teller : DSIQ FERDINAND ABRAM D. AMBATA								
This is your receipt when machine validated.										

OCS 03111
(Rev 1 - 27May13)