| Note: "Remarks" sh  | Prepared by JENIFER R  | Less: Petty Cash Received Advances from (Advances              |          |  |  |  |            |            |            | DST        | REG          | REG          | REG   | REG          | 冒               | 17-0ct-22  |         | Date Part        |                  |                                  | Requestor's Name:                 |   |
|---|--|--|----------|--|--|--|------------|------------|------------|------------|--------------|--------------|---|--------------|-----------------|------------|---------|------------------|------------------|----------------------------------|-----------------------------------|---|
| Note: "Remarks" shall be filled out by the Petty Cash Custodian | Nature/ date   | Less: Petty Cash Received Advances from (Advances to) employee |          |  |  |  |            |            |            |            |              | <u>υ</u>     | 5)  | 6)           | FILING FEE (FF) |            |         | Particular       |                  |                                  | ī                                 |   |
| ne Petty Cash Cu  |  |  |          |  |  |  |            |            |            | 30 x 4     | 50 x 5 UNITS | 50 x 5 UNITS | 50 x 10 UNITS   | 50 x 6 UNITS | 180 X 4 INVOICE | SHORTRANGE |         | From             | Destination      |                                  | JENIFER RAPISTA                   |   |
| stodian   | Checked by Signature by Signature by Signature of the Imagediate Superior/date |  |          |  |  |  |            |            |            | 4          | NITS         | NITS         | STINU   | NITS         | NVOICE          | NGE        |         | То               | tion             |                                  | STA                               |   |
|   | d name of the  |  | 2,140.00 |  |  |  |            |            |            | 120.00     | 250.00       | 250.00       | 500.00  | 300.00       | 720.00          |            |         | Amount           |                  |                                  |                                   |   |
|   |  | 2,140.00   |          |  |  |  |            |            |            |            |              |              |   |              |                 |            |         | Remarks          |                  |                                  |                                   | P   |
|   | Reviewed by:  Signature over printed name of the Petty Cash Custodian/ date    | /  |          |  |  |  |            |            |            | INVOICE #: |              |              | NTC SHO   |              |                 |            |         | Company name     | Sup              | Date of Liquidation: Nov 4, 2022 | Date of Requisition: Oct 17, 2022 | PETTY CASH LIQUIDATION REPORT REIMBURSEMENT |
|   |  |  |          |  |  |  | 0009197298 | 0009163680 | 0009131949 | 0009216951 |              |              | NTC SHORTRANGE APPLICATION FOR APPLE SHIPMENT VIA GLX |              |                 |            |         | Address          | Supplier details | v 4, 2022                        | t 17, 2022                        | ORT   |
|   | Received by: Signature ov the Re-  | Applicable resulted to   |          |  |  |  |            |            |            | OR #       |              |              | ATION FOR   |              |                 |            |         | TIN#             |                  |                                  |                                   |   |
|   | Received by:  Signature over printed name of the Requestor/ date               | Applicable if the liquidation resulted to "Advances from"      |          |  |  |  | 1273460    | 1273461    | 1273459    | 1273462    |              |              | APPLE SH  |              |                 |            |         | SI# C            |                  |                                  |                                   |   |
|   | e of   | ָה ב   |          |  |  |  |            |            |            |            |              |              | IPMENT V  |              |                 |            |         | OR# Ref#         |                  |                                  |                                   |   |
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|   | Received by:  Signature over printed name of the Petty Cash Custodian/ date    | Applicable if the liquidation resulted to "Advances to"        |          |  |  |  |            |            |            |            |              |              |   |              |                 |            | CACINDA | Vat Vat          |                  |                                  |                                   |   |

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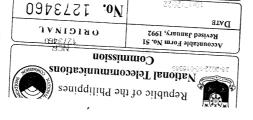
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BOXTALKS INC.

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NOTE: Write the number and date of this receipt on the back of treasury warrant, check or money order received.

Соглестию Отрисев



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### Commission Zarional Telecommunications

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BIR Road, East Triangle, Diliman, Quezon City NATIONAL TELECOMMUNICATIONS COMMISSION Republic of the Philippines

Form No. <u>NTC 1-19</u>
Revision No. <u>01</u>
Revision Date <u>03/31/2021</u>

BIR Road, East Triangle, Diliman, Quezon City NATIONAL TELECOMMUNICATIONS COMMISSION

| Revision Date | Revision No. | Form No. |  |
|---------------|--------------|----------|--|
| 03/31/2021    | 01           | NTC 1-19 |  |

# APPLICATION FOR CERTIFICATE OF REGISTRATION

| ODUCED  | ND CAN BE REPR   | THIS FORM IS NOT FOR SALE AND CAN BE REPRODUCED  |   |
|---|--|--|---|
| Collecting Officer  |  | Date Accomplished  |   |
|   |  | Signature over Printed Name of Applicant / Duly Authorized Signatory/Representative  | Signatu<br>Duly A   |
| OR NO.  |  | MAYROS MORALES   | M   |
| nereby declare that all the above entries are true and correct. Under the Revised Penal Code, I shall be held liable for any willful false statement(s) or inserpresentation(s) made in this application form that may serve as a valid ground for the denial of this application and/or cancellation/revocation of the permit issued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic to 10713. Data Privacy Act of 2012. | ised Penal Code, I<br>ground for the deni<br>ction and processin | re entires are true and correct. Under the Rey<br>is application form that may serve as a valid<br>er, I am freely giving full consent for the colle<br>of 2012. | nereby declare that all the above entrie<br>hisrepresentation(s) made in his applicing<br>the permit issued/granted. Further, I am<br>tat No. 10713. Data Privacy Act of 2012 |
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| FFWJ85LRN73D  | 1  | 21-ITP   | IPHONE 11 BLACK 128GB A2221-ITP   |
| FFW18F57N73D  | 1  | 21-ITP   | IPHONE 11 BLACK 128GB A2221-ITP   |
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| FFWJ90TTN73D  | p-ix   | 21-119   | IPHONE 11 BLACK 128GB A2221-ITP   |
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| •   | necessary)   | PARTICULARS OF EQUIPMENT & DEVICES (Use separate sheet/s, if necessary)  | PARTICULARS OF EQUIPM   |
| 9   | Validity (mm/dd/yy)  |  | CECN/EA/ROL No.   |
| 0009216951  | Invoice No.  | NTC0914225783026   | Permit to Import No.  |
|   | Email Address  | 8654-3561  | Contact Number  |
|   | Zip Code   |  | Flovilice   |
| CUBAO QUEZON CITY   | City/Municipality  | SAN MARTIN DE PORRES   | Barangay  |
| MAYOR IGNACIO SANTOS DIAZ ST.   | Street   | 56   | Unit/Rm/Bldg No.  |
|   |  | BOXTALKS INC.,   |   |
|   |  |  | APPLICANT'S DETAILS   |
|   | TABLE)   | PUBLIC TRUNKED RADIO EQUIPMENT (MOBILE/PORTABLE)   | PUBLIC TR   |
|   | '  | SHORT RANGE RADIO SERVICE (SRRS) DEVICES   | SHORT RA  |
|   | 0,   | RADIO FREQUENCY IDENTIFICATION (RFID) DEVICES  |   |
|   | ;  | SHORT RANGE DEVICES (SRD)  | SHORT RA  |
|   | æ  | WIRELESS DATA NETWORK (WDN) DEVICES - INDOOR   | WIRELESS  |
|   |  | T/DEVICE   | TYPE OF EQUIPMENT/DEVICE  |
|   | applicable.  | (3) Check (✔) appropriate box. Indicate "N/A" for items not applicable   | (3) Check ( ) app   |
| vebsite: www.ntc.gov.ph   | Edition at NTC v   | please refer to the NTC Citizen's Charter 2021 Second Edition at NTC website: www.ntc.gov.ph   | please refer to the   |
| e List of requirements,   | ocuments. For the  | (2) Attach the complete requirements including supporting documents. For the List of requirements  | (2) Attach the comp   |
| omputer-printed.  | handwritten or co  | (1) Accomplish this application form properly, in ALL CAPS, handwritten or computer-printed  | <ol><li>Accomplish this</li></ol>   |
|   |  |  | INSTRUCTIONS:   |

### Republic of the Philippines

## APPLICAT

INSTRUCTIONS:

(3) Check ( ✓ ) appropriate box. Indicate "N/A" for items not applicable.

(2) Attach the complete requirements including supporting documents. For the List of requirements, (1) Accomplish this application form properly, in ALL CAPS, handwritten or computer-printed.

please refer to the NTC Citizen's Charter 2021 Second Edition at NTC website: www.ntc.gov.ph

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| WIRELESS DATA NET   | NI/DEVICE                                | WONIN DEVICES IND                                | á                   |         |                                     |
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| SHORT R   | SHORT RANGE DEVICES (SRD)                | SHORT RANGE DEVICES (SRD)                        | Č                   |         |                                     |
| RADIO FR  | REQUENCY IDENTIFI                        | RADIO FREQUENCY IDENTIFICATION (RFID) DEVICES    | ES                  |         |                                     |
| SHORTR  | SHORT RANGE RADIO SERVICE (SRRS) DEVICES | CE (SRRS) DEVICES                                |                     |         |                                     |
| PUBLIC T  | RUNKED RADIO EQI                         | PUBLIC TRUNKED RADIO EQUIPMENT (MOBILE/PORTABLE) | RTABLE)             |         |                                     |
| APPLICANT'S DETAILS   |  |  |                     |         |                                     |
| Applicant BOX   | BOXTALKS INC.,                           |  |                     |         |                                     |
| Unit/Rm/Bldg No.  | 56                                       |  | Street              | MAYOR   | MAYOR IGNACIO SANTOS DIAZ ST        |
| Barangay  | SAN MARTIN                               | SAN MARTIN DE PORRES                             | City/Municipality   | CUBAO ( | City/Municipality CUBAO QUEZON CITY |
| Province  |  |  | Zip Code            |         |                                     |
| Contact Number  | 8654-3561                                |  | Email Address       |         |                                     |
| Permit to Import No.  | NTC0822225755423                         | 55423  | Invoice No.         | 0009    | 0009131949                          |
| CPCN/PA/RSL No.   |  |  | Validity (mm/dd/yy) |         |                                     |
| PARTICULARS OF EQUIPMENT & DEVICES (Use separate sheet/s, if necessary) | MENT & DEVICES                           | (Use separate sheet/s,                           | if necessary)       |         |                                     |
| Make/Type/Model   | fodel                                    | ۵  | Quantity            |         | Serial Number                       |
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| IPAD MINI WI-FI 64GB SPACE GRAY-PPN                                     | E GRAY-PPN                               |  | j-n                 |         | Q4339F1QHD                          |
| IPAD MINI WI-FI 64GB SPACE GRAY-PPN                                     | E GRAY-PPN                               |  | ş-n                 |         | WWFWG0WQ3J                          |
| IPAD MINI WI-FI 64GB SPACE GRAY-PPN                                     | E GRAY-PPN                               |  | **                  |         | YP40Y916W3                          |
| IPAD MINI WI-FI 64GB SPACE GRAY-PPN                                     | E GRAY-PPN                               |  |                     |         | V2F39WMV0J                          |
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I hereby declare that all the above entries are true and correct. Under the Revised Penal Code, I shall be held liable for any willful false statement(s) or imisrepresentation(s) made in this application form that may serve as a valid ground for the denial of this application and/or cancellation/revocation of the permit issued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Data Privacy Act of 2012.

Signature over Printed Name of Applicant Duly Authorized Signatory/Representative

Date Accomplished

Collecting Officer

THIS FORM IS NOT FOR SALE AND CAN BE REPRODUCED

MAYROS MORALES

OR NO. AMOUNT

26



NATIONAL TELECOMMUNICATIONS COMMISSION Republic of the Philippines BIR Road, East Triangle, Diliman, Quezon City

Form No. NTC 1-19
Revision No. 01
Revision Date 03/31/2021

INSTRUCTIONS

NATIONAL TELECOMMUNICATIONS COMMISSION BIR Road, East Triangle, Diliman, Quezon City Republic of the Philippines

APPLICATION FOR CERTIFICATE OF REGISTRATION

Form No. NTC 1-19
Revision No. 01
Revision Date 03/31/2021

## APPLICATION FOR CERTIFICATE OF REGISTRATION

### INSTRUCTIONS

- (1) Accomplish this application form properly, in ALL CAPS, handwritten or computer-printed
- (2) Attach the complete requirements including supporting documents. For the List of requirements please refer to the NTC Citizen's Charter 2021 Second Edition at NTC website: www.ntc.gov.ph
- (3) Check ( → ) appropriate box. Indicate "N/A" for items not applicable.

TYPE OF EQUIPMENT/DEVICE

SHORT RANGE DEVICES (SRD)

SHORT RANGE RADIO SERVICE (SRRS) DEVICES

RADIO FREQUENCY IDENTIFICATION (RFID) DEVICES WIRELESS DATA NETWORK (WDN) DEVICES - INDOOR (3) Check ( ✓) appropriate box. Indicate "N/A" for items not applicable

(2) Attach the complete requirements including supporting documents. For the List of requirements (1) Accomplish this application form properly, in ALL CAPS, handwritten or computer-printed

please refer to the NTC Citizen's Charter 2021 Second Edition at NTC website: www.ntc.gov.ph

| TYPE OF EQUIPMENT/DEVICE | NT/DEVICE  |                     |                              |
|--------------------------|--|---------------------|------------------------------|
| WIRELES                  | WIRELESS DATA NETWORK (WDN) DEVICES - INDOOR                           | OOR                 |                              |
| SHORT RA                 | SHORT RANGE DEVICES (SRD)  |                     |                              |
| RADIO FR                 | RADIO FREQUENCY IDENTIFICATION (RFID) DEVICES                          | ES                  |                              |
| SHORT RA                 | SHORT RANGE RADIO SERVICE (SRRS) DEVICES                               |                     |                              |
| PUBLIC TR                | PUBLIC TRUNKED RADIO EQUIPMENT (MOBILE/PORTABLE)                       | RTABLE)             |                              |
| PPLICANT'S DETAILS       |  |                     |                              |
| oplicant BOXT            | BOXTALKS INC.,   |                     |                              |
| nit/Rm/Bldg No.          | 56   | Street              | MAYOR IGNACIO SANTOS DIAZ ST |
| arangay                  | SAN MARTIN DE PORRES   | City/Municipality   | CUBAO OUFZON CITY            |
| ovince                   |  | Zip Code            |                              |
| ontact Number            | 8654-3561  | Email Address       |                              |
| ermit to Import No.      | NTC0905225771367   | Invoice No.         | 0009163680                   |
| CN/PA/RSL No.            |  | Validity (mm/dd/yy) | )                            |
| ARTICULARS OF EQUIP      | ARTICULARS OF EQUIPMENT & DEVICES (Use separate sheet/s, if necessary) | if necessary)       |                              |
| Make/Type/Mode           |  | Quantity            | Serial Number                |
| APP UNT AWS7 GPS SPORT I | APP UNT AWS7 GPS SPORT BAND 45MM BLUE/ABYSS BLUE                       | şx                  | GELLSAAGAIS                  |
| APP UNT AWS7 GPS SPORT I | APP UNT AWS7 GPS SPORT BAND 45MM BLUE/ABYSS BLUE                       | 30                  | LOGNEAULMS                   |
| APP UNT AWS7 GPS SPORT I | ABYSS BLUE AND 45MM BLUE ABYSS BLUE                                    | <i>y</i> **         | \$0956Hf9905                 |
| IPP UNT AWS7 GPS SPORT E | IPP UNT AWS7 GPS SPORT BAND 45MM BLUE/ABYSS BLUE                       | ş-A                 | SBRWINGIGRN                  |
| APP UNT AWS7 GPS SPORT I | APP UNT AWS7 GPS SPORT BAND 45MM BLUE ABYSS BLUE                       | ;                   | HEHMHDDAMDS                  |
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| TOTAL                    | 7  |                     |                              |
| CLABATION                |  |                     |                              |

Duly Authorized Signatory/Representative Signature over Printed Name of Applicant /

Date Accomplished

Collecting Officer

THIS FORM IS NOT FOR SALE AND CAN BE REPRODUCED

MAYROS MORALES

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DATE:

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Signature over Printed Name of Applicant

MAYROS MORALES

Duly Authorized Signatory/Representative

AMOUNT 9

Collecting Officer

DATE ĕ

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Date Accomplished

THIS FORM IS NOT FOR SALE AND CAN BE REPRODUCED

I hereby declare that all the above entries are true and correct. Under the Rewised Penal Code, I shall be held liable for any willful false statement(s) or misrepresentation(s) made in this application form that may serve as a valid ground for the denial of this application and/or cancellation/revocation of the permit issued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Data Privacy Act of 2012. I hereby declare that all the above entries are true and correct. Under the Revised Penal Code, I shall be held liable for any willful false statement(**9) or** insrepresentation(s) made in this application form that may serve as a valid ground for the denial of this application anctior cancellation/revocation of the permit issued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Data Privacy Act of 2012. DECLARATION PARTICULARS OF EQUIPMENT & DEVICES (Use separate sheet/s, if necessary) CPCN/PA/RSL No. Permit to Import No APPLICANT'S DETAILS IPAD WI-FI 64GB SILVER-PPN Contact Number rovince darangay Jnit/Rm/Bldg No. Applicant IPAD WI-FI 64GB SILVER-PPN PAD WI-FI 64GB SILVER-PPN IPAD WI-FI 64GB SILVER-PPN PAD WI-FI 64G8 SILVER-PPN Make/Type/Model TOTAL PUBLIC TRUNKED RADIO EQUIPMENT (MOBILE/PORTABLE) BOXTALKS INC., SAN MARTIN DE PORRES NTC0905225772175 8654-3561 Quantity Street Validity (mm/dd/yy) Invoice No. Email Address City/Municipality Zip Code CUBAO QUEZON CITY MAYOR IGNACIO SANTOS DIAZ ST 0009197298 QP192PGF93 KS26KYV4YH RIVX79F4GW TWZWSYX6N1 Q4C62405V2 Serial Number