

BOXTALKS INC

Period Covered:

JUNE 13-16, 2022

ADMIN REIMBURSEMENT

DATE	DESCRIPTION	AMOUNT
6/13/2022	ARVIN GAVINO-OMB IMPORT PERMIT APPLICATION	33.60
	MAIN OFFICE TO OMB	
6/14/2022	CHINO DE LEON-DELIVERY OF 2 PCS TRACKLIGHT FOR REPAIR WORKS DW EDSA SHANGRI-LA (DWES-061022-0028)	72.00
	MAIN OFFICE TO CUBAO	
	CUBAO TO SHAW	
	SHAW TO CUBAO	
	CUBAO TO MAIN OFFICE	
6/15/2022	CHINO DE LEON-INSTALLED NEWLY REPAIRED 2 PCS TRACKLIGHT IN DW EDSA SHANGRI-LA (DWES-060822-0027)	112.00
	MAIN OFFICE TO CUBAO	
	CUBAO TO RECTO	
	RECTO TO CUBAO	
	CUBAO TO SHAW	
	SHAW TO CUBAO	
	CUBAO TO MAIN OFFICE	
6/16/2022	ARVIN-SALES REPORT FILING & MPDP RENEWAL AT NTC/2 IMPORT PERMIT APPLICATION AT OMB	121.60
	MAIN OFFICE TO NTC	
	NTC TO OMB	
	OMB TO NTC	
	NTC TO MAIN OFFICE	
	JENIFER RAPISTA-AUB DEPOSIT FOR APPLE SHIPMENT VIA GLX PAYMENT FOR NTC IMPORT PERMIT VIA NSW WEBSITE	100.00
	AUB DEPOSIT	
TOTAL:		439.20

Prepared by:

JENIFER RAPISTA
ADMIN

Approved by:

KAT GO
ADMIN HEAD

(ORIGINAL)



**Official Receipt
of the
Republic of the Philippines**

Nº 3880474 E

Date 11-19-2022

Agency ¹⁰⁰⁴⁶

ORCA READER

Fund

Payor

ORIGIN

	Nature of Collection	Account Code	Amount
4	Impact Permit	615	2,050.00
1	Clearance	615	50.00
			2,050.00
	TOTAL		P

Amount in Words Two Thousand Eight Hundred Only

<input type="checkbox"/> Cash	Drawee Bank	Number	Date
<input type="checkbox"/> Check			
<input type="checkbox"/> Money Order			

Received the amount stated above.

INDEX

Collecting Officer

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



the President of the Philippines

CAL MEDIA BOARD

aga Street Bgy. Laging Handa, Quezon City
93 * Fax No. 374-0237 * www.umb.gov.ph

ATTENTION *Required Entries / Selection

ON FOR IMPORT PERMIT

SS NAME	CONTACT NO.
KS INC	86543561
ESS ADDRESS	
) THE BOX-BGC LOWER GROUND FLOOR C3 BONIFACIO HIGH 28TH ST. TAGUIG CITY Metro Manila	
ANT/REPRESENTATIVE	*POSITION
IS PAW	OWNER
WG COMPANY / FORWARDER	*CONTACT NO.
	717-6765
ESS ADDRESS	*POINT OF ORIGIN
Units 3&4 Oyster Industrial Complex	China
e, Paranaque City	
SOURCE OF RIGHTS	*BUSINESS NAME
	BOXTALKS INC
	*BUSINESS ADDRESS
	BEYOND THE BOX-BGC LOWER GROUND FLOOR C3 BONIFACIO HIGH STREET, 28TH ST. TAGUIG CITY Metro Manila

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FORMATION

Item	Serial No.	Quantity	SID Code
(ds, etc.)			

on	Manufacturer	Mold or Stamper or SID or LBR No.
----	--------------	--------------------------------------

	1 Each	SVC,IPAD PRO 12.9,5G,WIFI,128GB,GRAY- ITP 1 A2378	APPLE	Q193PV90NW
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SWORN UNDERTAKING

1. I hereby declare that I am a duly licensed and duly qualified person, as required by the rules and regulations in compliance with R.A. 9239 and its implementing rules and regulations;
2. that the copy of AWP /BL as submitted is true and correct;
3. that it is clearly understood that failure and/or refusal to comply with the undertaking by me and/or my representative/s shall be a ground for revocation of my license;
and
4. I hereby certify to the correctness of the information given in connection with this application under pain of perjury.

QOC, NO

PAGE NO

74102 NO

ARRIES O

ATTY. RYAN C. CORTIZ

NOTARY PUBLIC QUEZON CITY
PTR No. 2564877; 01/27/2022; Q.C.

Roll No. 72112
 MCLE Compliance No. VI - 0030688
 Adm No. NP-071(2021-2022)
 UNTIL DECEMBER 31, 2022

CHARLES PAW
NAME & SIGNATURE OF APPLICANT



OMB0609225668084

DATES - 06/02 - 0028

John Deacon

POKES

[illegible]

Signature over printed name of
the Petty Cash Custodian/ date

Note: "Remarks" shall be filled out by the Petty Cash Custodian

DIGITS TRADING INC.

#56 Mayor Ignacio S. Diaz St., Brgy. San Martin De
Pores, Quezon City

WORK ORDER REQUEST FORM

REQUESTOR'S NAME
DEPARTMENT/STORE

DJ Sangnila

DATE SUBMITTED

06/10/22

WOR NO.

DWES - 041022 - 0028

PRIORITY LEVEL

☐

EMERGENCY

☐

URGENT/HIGH

☐

INTERMEDIATE/MEDIUM

☐

LOW

Please check the boxes above for the priority level indication.

WORK REQUEST/PROBLEM COMPLETE DESCRIPTION

broken down light

REQUESTEE'S NAME

Bon Bonito

DEPARTMENT

IT

DATE RECEIVED

06/10/22

CONTRACTOR/IN-HOUSE

Contractor

To be fill up by the requestor, kindly please make the problem description clear and concise.

To be fill up by the requestee (usually for admin dept. personnel).

WORK/ACTIVITIES PERFORMED

Date

Start Time

End Time

Service Report No.

per inspection only

MATERIALS/PARTS USED

QTY	UNIT	MATERIALS/PARTS DESCRIPTION	OR NO.	SI NO.	TIN NO.	UNIT PRICE	AMOUNT

To be fill up by the maintenance in-house or admin dept. base on the service report submitted by the contractor.

ADDITIONAL INSTRUCTIONS

VERIFIED BY

Mariano V. Vela

DATE VERIFIED

06-14-22

To be fill up by the maintenance in-house or admin dept. base on the service report submitted by the contractor.

To be fill up by the admin dept. and requestor..

Date of Requisition: 06/15/02
Date of Liquidation: 07/15/02

PORTALLS

Pluses - 060822-6027

Chloro d'Inde

Date of Requisition: 06/15/2022
Date of Liquidation: 06/15/2022

[illegible]

Prepared by: [Signature]
Requested Signature/Date: [Signature]

Checked by:

Signature over printed name of the
Immediate Superior/ date

Reviewed by:

Signature over printed name of the
Petty Cash Custodian/ do/ he

Signature over printed name of the Requestor/ date

Signature over printed name of the Petty Cash Custodian/ date

Note: "Remarks" shall be filled out by the Party Cash Custodian

DIGITS TRADING INC.

456 Mayor Ignacio S. Diaz St., Brgy. San Martin De
Pores, Quezon City

WORK ORDER REQUEST FORM

REQUESTOR'S NAME
DEPARTMENT/STORE

DW Gnanapala

DATE SUBMITTED

06/08/22

WOR NO.

DBES-00622-0029

PRIORITY LEVEL

☐

EMERGENCY

☐

URGENT/HIGH

☐

INTERMEDIATE/MEDIUM

☐

LOW

Please check the boxes above for the priority level indication.

WORK REQUEST/PROBLEM COMPLETE DESCRIPTION

- backed from light

REQUESTEE'S NAME
DEPARTMENT

Don Pando
ADM

DATE RECEIVED

06/15/22

CONTRACTOR/IN-HOUSE

C. de la Cruz

To be fill up by the requestee (usually for admin dept. personnel).

WORK/ACTIVITIES PERFORMED

Date

Start Time

End Time

Service Report No.

- for repair on the unit and replacement of lights

MATERIALS/PARTS USED

QTY	UNIT	MATERIALS/PARTS DESCRIPTION	OR NO.	SI NO.	TIN NO.	UNIT PRICE	AMOUNT

To be fill up by the maintenance in-house or admin dept. base on the service report submitted by the contractor.

ADDITIONAL INSTRUCTIONS

DONE

VERIFIED BY

JESSICA KUNLANO

DATE VERIFIED

06/15/22

To be fill up by the admin dept. and requestor.

PETTY CASH LIQUIDATION REPORT

Requestor's Name:

Quinlan

Date of Requisition:

DA-66-22

Date of liquidation:

[illegible]

Prepared by:

Checked by:

Reviewed by:

100

.....

Requestor's Signature/ date

Signature over printed name of the

Signature over printed name of the

negatively vice

THE FIRST PART OF THE JOURNAL

Note: "Remarks" shall be filled out by the Petty Cash Custodian



OFFICIAL RECEIPT
Republic of the Philippines
National Telecommunications Commission

Accountable Form No. 51
Revised January, 1992

ORIGINAL

DATE 06-16-2022 No. **1250307**

PAYOR 2:51 PM

BOXTALKS INC.

NATURE OF COLLECTION	AMOUNT
PERMITTEE	1,000.00
INSPECTION FEE	1,000.00
DST	30.00
TOTAL	3,030.00
AMOUNT IN WORDS	THREE THOUSAND THIRTY PESOS
TOTAL	P 3,030.00

Received ☒ Cash ☐ Treasury Warrant ☐ Check ☐ Money Order

Treasury Warrant, Check, Money Order Number

Date of Treasury Warrant, Check, Money Order

Received from the Amount Stated Above

By S. DELA CRUZ, Jr.

COLLECTING OFFICER

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

ACKNOWLEDGEMENT RECEIPT

Unique Identification No.: 37

Applicant: **BOXTALKS INC.**

Date and Time Received: 06-16-2022 3:01 PM

Date and Time of Release: 06-23-2022 11 am (with 1205)

WE

Receiving Officer
Signature over Printed Name

AMOUNT OF THREE THOUSAND THIRTY PESOS

(P3,030.00)

for payment of RENEWAL(REN) - (Purpose)

as per SOA No. : 28-2022-06-006968 DATE : June 16, 2022

Please deposit the collections under Bank Account(s):
(For NTC-NCR use ONLY)

Account No.	Name of Bank	Amount
3402-26xx-xx	Land Bank of the Philippines	P 3,030.00

TOTAL : **P3,030.00**

MA-LYN N. BATA-HYDEE DEL ROSARIO MARIA ANGELA S.

*SOA - Statement Of Account

Any corrections and/or alterations will invalidate this Order of Payment
Payment should be made on the date of issuance of this Order of Payment

Agent of Account.

(ORIGINAL)



**Official Receipt
of the
Republic of the Philippines**

Nº 3880640 E

Date June 16, 2002

Agency INTRA-ARMED

Fund

Payor	BANK OF AMERICA
-------	------------------------

Nature of Collection	Account Code	Amount
1 IMPROV PAYEE	605	P ^{1,000.00}
1 CHURCH	615	50.00
		P ^{1,050.00}
TOTAL		P

Amount in Words One Thousand Fifty Nine Only

<input type="checkbox"/> Cash	Drawee Bank	Number	Date
<input type="checkbox"/> Check			
<input type="checkbox"/> Money Order			

Received the amount stated above.

Collecting Officer

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



the President of the Philippines

CAL MEDIA BOARD

iga Street Bgy. Laying Honda, Quezon City
G * Fax No. 374-0237 * www.ontb.gov.ph

ATTENTION *Required Entries / Selection

ON FOR IMPORT PERMIT

ISS NAME	CONTACT NO.
CS INC	86543561
ISS ADDRESS	
THE BOX-VMALL 3RD FLOOR VMALL SHOPPING CENTER, HILLS Metro Manila SAN JUAN CITY	
ANTIREPRESENTATIVE	POSITION
S PAW	OWNER
IG COMPANY / FORWARDER	CONTACT NO.
	717-6765
ISS ADDRESS	POINT OF ORIGIN
Units 3&4 Oyster Industrial Complex a, Paranaque City	China
SOURCE OF RIGHTS	BUSINESS NAME BOXTALKS INC BUSINESS ADDRESS BEYOND THE BOX-VMALL 3RD FLOOR VMALL SHOPPING CENTER, GREENHILLS Metro Manila SAN JUAN CITY

FORMATION

del	Serial No.	Quantity	SID Code
Ids, etc.)			
tion	Manufacturer	Mold or Stamper or SID or LBR No.	
IGB,GRAY-	APPLE	TN4R5KC217	
,GRAY-1P1	APPLE	X3T0X39LRY	
PRD 3LU,CI/AR 1	APPLE	GHHY5HWY4N	
,GRAY-1P1	APPLE	FNXHT01Q1GG	
RAY-1P 1	APPLE	F6QGVD1GLM99	

SWORN UNDERTAKING

1. I hereby accept the authority of OMB Agents/Representatives to inspect shipments of waste in compliance with RCRA 2623 and implementing rules and regulations; and that the copy of AWM/BL submitted is true and correct;
2. I am fully aware of the consequences of this statement and I understand that any false statement or omission may result in the revocation of my license and/or other legal action.
3. I am fully aware of the consequences of this statement and I understand that any false statement or omission may result in the revocation of my license and/or other legal action.
4. I hereby certify to the correctness of the information given in connection with this statement and I understand that any false statement or omission may result in the revocation of my license and/or other legal action.
- Signature: _____ Date: June 18, 2022

CHARLES PAW
PRINTED NAME & SIGNATURE OF APPLICANT

AUTY-KAROL CORTEZ
NOTARY PUBLIC CHICAGO CITY
 PTA No. 2564877; 01/27/2022; Q.C.
 IBP No. 178355; 02/15/2022;
 Roll No. 72112
 MCLE Compliance No. VI- 0030668
 Adm. No. NP-071(2021-2022)
 UNTIL DECEMBER 31, 2022



OMB0615225675130

DOC NO:

PAGE NO

ROGS NO

SERIES OF

Date of Requisition: 6-16-22
Date of liquidation: 6-16-22

Signature over printed name of

Note: "Remarks" shall be filled out by the Petty Cash Custodian

✓ Transaction Successful

BDO pay

instaPay

**Sent Money to
Asia United Bank via InstaPay
049130002984
MARIA MELINDA FERRER**

PAYROLL-ZERO

●●●●●●●●7256

Jun 16 2022 02:22 PM

Reference No.: 202206161152299235wJ05eG8

Amount

PHP 100.00

Service Fee: PHP 0.00

Deducted Amount: PHP 100.00

Thank you for using BDO Pay!

[Back Now](#)

[Back Now](#)

[Back Now](#)

[Back Now](#)

[Back Now](#)

[Back Now](#)



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Your Balance Inquiry
made on 05/16/2022
from your bank Asia United Bank
at this time 100946
for your Savings Account
Shows your Current Balance at 220.00
and Available Balance at 220.00
Please remember this
Trace Number ▶ 703370

Thank you for using BancNet Online



250

60 pesos,

9090