


CERTIFICATE OF REGISTRATION

TIN & BRANCH CODE 731-01540-5-00000	NAME OF TAXPAYER PALA, APREL MAY TANGKAY	TIN ISSUANCE DATE October 17, 2018
REGISTERING OFFICE	<input checked="" type="checkbox"/> Head Office	<input type="checkbox"/> Branch
REGISTERED ADDRESS BAM: 8309 BAROBO SURIGAO DEL SUR PHILIPPINES		

TAX TYPES	FORM TYPES	FILING START DATE	FILING FREQUENCY	FILING DUE DATE
INDIVIDUAL INCOME TAX	1701/1701A	January 1, 2024	ANNUALLY	On or before April 15 of each year covering income for the preceding taxable year.
INDIVIDUAL INCOME TAX	1701Q	February 15, 2023	QUARTERLY	1st Quarter-on or before MAY 15 2nd Quarter-on or before AUGUST 15 3rd Quarter-on or before November 15
PERCENTAGE TAX - QUARTERLY	2551Q	February 15, 2023	QUARTERLY	Within twenty five (25) days after the end of each taxable quarter
REGISTRATION FEE	0005	January 1, 2024	ANNUALLY	On or before the last day of January
TAXPAYER TYPE/S	SINGLE PROPRIETORSHIP ONLY (RESIDENT CITIZEN)			

BUSINESS INFORMATION DETAILS

TRADE NAME 1	A&J WOOD PRODUCTS MANUFACTURING	CATEGORY	REGISTRATION DATE
(PSIC)	47523 RETAIL SALE OF LUMBER	Primary	February 15, 2023
Line of Business	WOOD PRODUCTS MANUFACTURING		
(PSIC)	46631 WHOLESALE OF LUMBER AND PLANING MILL PRODUCTS, WOOD IN THE ROUGH	Secondary	CERTIFIED TRUE COPY FROM THE ORIGINAL DOCUMENT  HAYDEE L. CABEROS AAVI/Acting Records Officer DATE 6/1/2023
Line of Business	OTHER SPECIALIZED WHOLESALE		

CERTIFIED TRUE COPY
FROM THE ORIGINAL DOCUMENT

HAYDEE C. CABEROS
AAVI/Acting Records Officer

DATE 04 JUL 2024

REMINDERS

1. An annual registration fee shall be paid upon registration and every year thereafter on or before the last day of January, using BIR Form No. 0605.
2. Filing of required tax return/s to conform with the above Administrative Order, whether with or without business operation, to avoid penalties.
3. For new business registrants, application for registration of manual books (BIR forms) (B/A/s) shall be before the deadline for filing of the initial quarterly income tax return or annual income tax return whichever comes earlier, from the date of registration. Registration of new set of manual B/A/s shall be before its use.
4. Immediately inform the district office in case of transfer/cessation of business and other changes in registration information by filing BIR Form No. 1905.
5. For Self-Employed Individuals (SEI) whose gross sales and/or receipts and other non-operating income does not exceed P3,000,000 and who opted to avail of the 8% income tax rate, the tax type Percentage Tax (PT) shall not be reflected in the Certificate of Registration (COR). However, at the start of each taxable year, such SEI shall be automatically subjected to graduated income tax rates and required to file quarterly percentage tax return (BIR Form No. 2551Q) and option to replace the COR to reflect "PT" unless qualified

BIR PAYMENT SLIP

LAND BANK

Please check appropriate box:
☒ Cash ☐ Bank Debit System

Account Name: **BUREAU OF THE TREASURY - BIR**

TAX IDENTIFICATION NUMBER: **111 915 075**

Revenue District Office: **106** Accounting Type (A/C): ☐

Quarter No. (0, 1, 2, 3, or 4): ☐ Tax Period Fiscal Year End (mm/yyyy): **12 11 23**

Name of Taxpayer Representative: **Piala, April May**

Signature of Taxpayer Representative: *[Signature]* Contact Number: **0917 123 4567**

Branch Code: **999 2 2 9 0 9 1 0** Branch Name: **000** Tax Type: **111** Form Type: **111 01**

Teller's Validation: **111 01**

1101 SAN FRANCISCO, CALIFORNIA, U.S.A.
 04-10-2024 15:45
 1101 SAN FRANCISCO, CALIFORNIA, U.S.A.
 04-10-2024 15:45
 1101 SAN FRANCISCO, CALIFORNIA, U.S.A.
 04-10-2024 15:45

CASH BREAKDOWN				CHECK PAYMENT	
NO. OF PIECES	DENOMINATION	AMOUNT		Name of Bank/Branch	
		PESOS	CENTAVIDS	Check Number	
	P 1,000.00			Amount	
	500.00				
	200.00				
	100.00				
	50.00				
	20.00				
	10.00				
	COINS				
TOTAL CASH PAYMENT		200	00		

FOR PAYMENT VIA DEBIT FROM ACCOUNT

BANK DEBIT ADVICE NUMBER: **111 01** ACCOUNT NUMBER: **111 01** AMOUNT: **200.00**

Signature Verified by: *[Signature]* Approved by: *[Signature]* Posted by: *[Signature]*

DEPOSITOR'S SIGNATURE: *[Signature]*

Taxpayer's Copy

22 Tax Due (Sum of Items 21 and 23)	0.00	0.00
23 Less: Total Tax Credit/Overpayment (Sum of Items 24 to 26)	0.00	0.00
24 Tax Payable/Overpayment (Item 22 Less Item 23)	0.00	0.00
25 Less: Portion of Tax Payable Allowed for 2nd Installment to be paid tax or before October 15, 50% or less of Item 24	0.00	0.00
26 Amount of Tax payable/Overpayment (Item 24 Less Item 25)	0.00	0.00
Add Penalties:		
27 Interest	0.00	0.00
28 Surcharge	0.00	0.00
29 Compromise	0.00	0.00
30 Total Penalties (Sum of Items 27 to 29)	0.00	0.00
31 Total Amount Payable/Overpayment (Sum of Items 26 and 30)	0.00	0.00
32 Aggregate Amount Payable/Overpayment (Sum of Items 26 and 30)	0.00	0.00

If overpayment, mark one (1) box only. (Once the choice is made, the same is irrevocable.)
☐ To be refunded ☐ To be issued a Tax Credit Certificate (TCC)

To be carried over as a tax credit for next year's return

I declare under the penalties of perjury that this return, and all its attachments, have been made in good faith, verified by me, and to the best of my knowledge and belief, are true and correct, pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under authority thereof. Further, I give my consent to the processing of my information as contemplated under the "Data Privacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes. (If signed by an Authorized Representative, indicate TIN and attach authorization letter)

Piala, April May

33 Number of Attachments: **00**

PART III - DETAILS OF PAYMENT

34 Cash/Bank Debit Slip: **CERTIFIED TRUE COPY FROM THE ORIGINAL DOCUMENT**

35 Check: **DATE: 04 JUL 2024**

36 Tax Debit Memo: **DATE: 04 JUL 2024**

37 Other (specify details): **DATE: 04 JUL 2024**

Machine Validation/Revenue Officer's Signature: **DATE: 04 JUL 2024**

Stamp of Receiving Office and Date of Receipt: **DATE: 04 JUL 2024**

Republic of the Philippines
Department of Finance
Bureau of Internal Revenue

Annual Income Tax Return
Individuals (including MIXED Income Earner), Estates and Trusts

Form 1701
January 2024 (New)
Page 1

1. Taxable Year (YYYY) 2023 2. Assessment Year 2024 3. Short Period Return

PART I - BACKGROUND INFORMATION OF TAXPAYER/FILER

4. Taxpayer Identification Number (TIN) 217-1234-5678 5. Return Code 100
6. Taxpayer Type Single Proprietor 7. Address (Mailing Address) 8. Taxpayer Name (Last Name, First Name, Middle Name) 9. Registered Address (Mailing Address) 10. Date of Birth (MM/DD/YYYY) 11. Email Address 12. Citizenship 13. Claiming Foreign Tax Credit? 14. Foreign Tax Number (if applicable) 15. Contact Number (Landline/Cellphone No.) 16. Civil Status (if applicable) 17. If married, how many income? 18. Filing Status 19. Income EXEMPT from Income Tax? 20. Income subject to SPECIAL/PREFERENTIAL RATES 21. Tax Rate (Choose Method of Deduction in Item 21A) 21A. Method of Deduction (Choose one) 22. Tax Due (Less Refund) (Item 21) 23. Less: Total Tax Credits/Payments (Less Refund) (Item 24) 24. Tax Payable/Overpayment (Item 23 Less Item 22) 25. Less: Portion of Tax Payable Allowed for 2nd installment to be paid on or before October 15 (50% or less of Item 23) 26. Amount of Tax payable/Overpayment (Item 24 Less Item 25) 27. Interest 28. Surcharge 29. Compromise 30. Total Payable (Sum of items 27 to 29) 31. Total Amount Payable/Overpayment (Sum of Items 26 and 30) 32. Aggregate Amount Payable/Overpayment (Sum of Items 26 and 30) 33. Number of Attachments 34. Cash/Check/Other 35. Check 36. Tax Debit Memo 37. Others (specify below)

PART II - TOTAL TAX PAYABLE

PART III - DETAILS OF PAYMENT

CERTIFIED TRUE COPY
FROM THE ORIGINAL DOCUMENT
HAYDEE CADEROS
AAV/Acting Records Officer
DATE: 04 JUL 2024

Stamp of Receiving Office and Date of Receipt
RC's Signature/Barangay Official