

CERTIFICATE OF REGISTRATION

TIN & BRANCH CODE 731-0160-5-00000	NAME OF TAXPAYER PIALA APREL MAY TANGKAY	TIN ISSUANCE DATE October 17, 2018
REGISTERING OFFICE	<input checked="" type="checkbox"/> Head Office <input type="checkbox"/> Branch	
REGISTERED ADDRESS BAHI 8309 BAROBO SURIGAO DEL SUR PHILIPPINES		

TAX TYPES	FORM TYPES	FILING START DATE	FILING FREQUENCY	FILING DUE DATE
INDIVIDUAL INCOME TAX	1701/17 01A	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	0605	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 (PSIC)	A&J WOOD PRODUCTS MANUFACTURING 47523-RETAIL SALE OF LUMBER	CATEGORY	REGISTRATION DATE February 16, 2023
Line of Business (PSIC)	WOOD PRODUCTS MANUFACTURING	Primary	CERTIFIED TRUE COPY FROM THE ORIGINAL DOCUMENT <i>[Signature]</i>
	46631-WHOLESALE OF LUMBER AND PLANING MILL PRODUCTS, WOOD IN THE ROUGH	Secondary	HAYDEE C. CABEROS AAVI/Acting Records Officer
Line of Business	OTHER SPECIALIZED WHOLESALE		DATE 04 JUL 2024

REMINDERS

- 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.
- Filing of required tax return/s to conform with the above requirements, whether with or without business operation, to avoid penalties.
- For new business registrants, application for registration of manual BIR FORMS OF ACCOUNTS (B/As) 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/As shall be before its use.
- Immediately inform the district office in case of transfer/cessation of business and other changes in registration information by filing BIR Form No. 1905.
- 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 6% 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

<input checked="" type="checkbox"/> Cash <input type="checkbox"/> Bank Credit Advance <input type="checkbox"/> Account Advance		<input type="checkbox"/> Bank Credit Advance <input type="checkbox"/> Account Advance																																									
BUREAU OF THE TREASURY - BIR																																											
TAX IDENTIFICATION NUMBER		91114781075																																									
Revenue District Office	Accounting Year (A.Y.)	Branch/Credit Office	Tax Type																																								
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Quarter No. (Q.1-Q.3 or 4)	Tax Period/Fiscal Year End (MM/DD/YY)																																										
	12/31/23																																										
Name of Taxpayer Representative	Pitala, Aprel May																																										
Signature of Taxpayer Representative	Contact Number:																																										
100% PAN FRANCHISE TAX (PFT) - BIR 09-10-2028 15-45 Tax Period/Billing Period CITIZEN REG. NO. 111111111111111111 EMPLOYEE ID/CELESTH BODATELLETT DINHEEDY Address:																																											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">CASH BREAKDOWN</th> <th colspan="2">CHECK PAYMENT</th> </tr> <tr> <th>NO. OF PIECES</th> <th>DENOMINATION</th> <th>AMOUNT</th> <th>Name of Bank/Branch</th> </tr> <tr> <th></th> <th>PESOS</th> <th>CENTAVOS</th> <th>Check Number</th> </tr> </thead> <tbody> <tr><td></td><td>1,000.00</td><td></td><td></td></tr> <tr><td></td><td>500.00</td><td></td><td></td></tr> <tr><td></td><td>200.00</td><td></td><td></td></tr> <tr><td></td><td>50.00</td><td></td><td></td></tr> <tr><td></td><td>20.00</td><td></td><td></td></tr> <tr><td></td><td>COINS</td><td></td><td></td></tr> <tr><td></td><td>TOTAL CASH PAYMENT</td><td>200.00</td><td></td></tr> </tbody> </table> <p>Kindly ensure that the enclosed cash tallies with the amount indicated in your payment slip. The Taxpayer shall be accountable for any discrepancy between the amount enclosed in the machine and the cash actually enclosed in the payment envelope.</p>				CASH BREAKDOWN		CHECK PAYMENT		NO. OF PIECES	DENOMINATION	AMOUNT	Name of Bank/Branch		PESOS	CENTAVOS	Check Number		1,000.00				500.00				200.00				50.00				20.00				COINS				TOTAL CASH PAYMENT	200.00	
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Taxpayer's Copy 22 Tax Due (Sum of Items 21 & 23) 23 Less Total Tax Credit/Payments (Sum of Item 24 & Item 25) 24 Tax Payable(Overpayment) (Item 22 Less Item 23) 25 Lesser Portion of Tax Payable Allowed for and Installment to be paid on or before October 15 (50% or less of Item 22) 26 Amount of Tax Payable(Overpayment) (Item 24 Less Item 25) Add Penalties 27 (Amount) 28 Surcharge 29 Computer Fee 30 Total Penalties (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) If overpayment, mark one: (1) Not Only (Cross the choice if more than one is incorrect) () 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)																																											
Printed Name and Signature of Taxpayer/Authorized Person Pitala, Aprel May		33 Number of Attachments: 0																																									
PART III - DETAILS OF PAYMENT																																											
Particulars 34 Cash/Bank Deposit 35 Check 36 Tax Debit Memo 37 Others (Specify details)		Date (MM/DD/YYYY)	Amount																																								
CERTIFIED TRUE COPY FROM THE ORIGINAL DOCUMENT NAY DEE C. CABEROS AAVI/Acting Records Officer DATE: 04 JUL 2024		Name of Receiving BIR Office and Date of Receipt BIR's Signature/Stamp/Initials 																																									
<small>NOTE: The BIR Data Privacy Policy is in the BIR website located on www.bir.gov.ph.</small>																																											

1701

Annual Income Tax Return

Individuals (including MIXED income Earner), Estates and Trusts
Form 1701 (2023) (Rev. 10-2023) (Mark all applicable boxes)
With an IC, two copies must be sent with the BIR and one copy by the Tax Filer.

1701 CURRENTS P1

Service Number/Account No.

Page

1. Name _____
2. Residence Address _____
3. Birth Date _____

PART I - BACKGROUND INFORMATION OF TAXPAYER/FILER

4. Address/Residential Number/Tipo	5. ZIP Code		
6. Sex _____	7. Age _____	8. Marital Status _____	9. Relationship to Tax Filer _____
Single/Figitator	Male	Married	Spouse
8. Age _____	9. Relationship to Tax Filer _____	10. Dependents _____	11. Dependents _____
10. Dependents _____	11. Dependents _____	12. Citizenship _____	13. Claiming Foreign Tax Credit _____
12. Citizenship _____	13. Claiming Foreign Tax Credit _____	14. Foreign Tax Number _____	15. Number/Number/Telephone No. _____
15. Number/Number/Telephone No. _____	16. Civil Status (if applicable)	17. Marital Status _____	18. Family Status _____
17. Marital Status _____	18. Family Status _____	19. Income EXEMPT from Income Tax _____	20. Income subject to SPECIAL/PREFERENTIAL RATE _____
19. Income EXEMPT from Income Tax _____	20. Income subject to SPECIAL/PREFERENTIAL RATE _____	(If Yes, file our also consolidation of ALL activities per Tax Regime (Part X))	(If Yes, file our also consolidation of ALL activities per Tax Regime (Part X))
21. Tax Rate _____	21A Method of Deduction/Allowance _____	22. Tax Due _____	23. Tax Due _____
Change Method of Deduction in Item 21A _____	22. Tax Due _____	23. Tax Due _____	24. Tax Due _____
22. Tax Due _____	22. Tax Due _____	23. Tax Due _____	24. Tax Due _____
23. Tax Due _____	23. Tax Due _____	24. Tax Due _____	25. Tax Due _____
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27. Tax Due _____	27. Tax Due _____	28. Tax Due _____	29. Tax Due _____
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30. Tax Due _____	30. Tax Due _____	31. Total Amount Payable/Overpayment _____	32. Aggregate Amount Payable/Overpayment _____
31. Total Amount Payable/Overpayment _____	32. Aggregate Amount Payable/Overpayment _____		
32. Aggregate Amount Payable/Overpayment _____			
33. Number of Attachments _____			
I declare under the penalties of perjury that the 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 in the processing of my information as contemplated under the Data Privacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes. I signed by an Authorized Representative. I indicate Title and attach authorization letter.			
Signature and Signature of Taxpayer/Authorized Representative			
34. Payment Method _____		35. Date (MM/DD/YYYY) _____	
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