

For BIR BCS/
Use Only Item:



Republic of the Philippines
Department of Finance
Bureau of Internal Revenue

BIR Form No.
1701A

January 2018 (ENCS)
Page 1

Annual Income Tax Return

Individuals Earning Income PURELY from Business/Profession
[Those under the graduated income tax rates with OSD as mode of deductions
OR those who opted to avail of the 8% flat income tax rate]
Enter all required information in CAPITAL LETTERS using BLACK ink. Mark all applicable boxes
with an "X". Two copies MUST be filed with the BIR and one held by the Tax Filer.



1701A 01/18 P1

1 For the Year (MM/YYYY) 12 2024 2 Amended Return? Yes ☐ No ☒ 3 Short Period Return? Yes ☐ No ☒

PART I - BACKGROUND INFORMATION ON TAXPAYER/FILER

4 Taxpayer Identification Number (TIN) <u>717</u> - <u>814</u> - <u>123</u> - <u>000</u>	5 RDO Code <u>103</u>	6 Taxpayer Type <input checked="" type="radio"/> Single Proprietor <input type="radio"/> Professional
7 Alphabetic Tax Code (ATC) <input checked="" type="radio"/> II012 Business Income-Graduated IT Rates <input type="radio"/> II014 Income from Profession-Graduated IT Rates <input type="radio"/> II015 Business Income-8% IT Rate <input type="radio"/> II017 Income from Profession-8% IT Rate		
8 Taxpayer's Name (Last Name, First Name, Middle Name) <u>pabillore, ESTER T.</u>		
9 Registered Address (Indicate complete address. If the registered address is different from the current address, go to the RDO to update registered address by using BIR Form No. 1905) <u>tr, adn</u>		
		9A Zip Code <u>8611</u>
10 Date of Birth (MM/DD/YYYY) <u>09/16/1966</u>	11 Email Address <u>hoeme0594@gmail.com</u>	
12 Citizenship <u>FILIPINO</u>	13 Claiming Foreign Tax Credits? Yes <input type="radio"/> No <input checked="" type="radio"/>	14 Foreign Tax Number, if applicable
15 Contact Number (Landline/Cellphone No.) <u>09098090194</u>	16 Civil Status <input type="radio"/> Single <input checked="" type="radio"/> Married <input type="radio"/> Legally Separated <input type="radio"/> Widow/er	
17 If married, spouse has income? Yes <input type="radio"/> No <input checked="" type="radio"/>	18 Filing Status <input type="radio"/> Joint Filing <input checked="" type="radio"/> Separate Filing	
19 Tax Rate <input checked="" type="radio"/> Graduated Rates with OSD as method of deduction <input type="radio"/> 8% in lieu of Graduated Rates under Sec. 24(A) & Percentage Tax under Sec. 116 of the NIRC. (available if gross sales/receipts and other non-operating income do not exceed Three million pesos (P3M))		

PART II - TOTAL TAX PAYABLE (DO NOT enter Centavos; 49 Centavos or less drop down; 50 or more round up)

Particulars	A) Taxpayer/Filer	B) Spouse
20 Tax Due (Either from Part IV A Item 42 OR Part IV B Item 56)	20A <u>0.00</u>	20B <u>0.00</u>
21 Less: Total Tax Credits/Payments (From Part IV C Item 64)	21A <u>0.00</u>	21B <u>0.00</u>
22 Tax Payable/(Overpayment) (Item 20 Less Item 21) (From Part IV Item 55)	22A <u>0.00</u>	22B <u>0.00</u>
23 Less: Portion of Tax Payable Allowed for 2nd Installment to be paid on or before October 15 (50% or less of Item 20)	23A <u>0.00</u>	23B <u>0</u>
24 Amount of Tax Required to be Paid upon Filing/(Overpayment) (Item 22 Less Item 23)	24A <u>0.00</u>	24B <u>0.00</u>
Add: Penalties		
25 Surcharge	25A <u>0.00</u>	25B <u>0</u>
26 Interest	26A <u>0.00</u>	26B <u>0</u>
27 Compromise	27A <u>200.00</u>	27B <u>0</u>
28 Total Penalties (Sum of Items 25 to 27)	28A <u>200.00</u>	28B <u>0.00</u>
29 Total Amount Payable/(Overpayment) (Sum of Items 24 and 28)	29A <u>200.00</u>	29B <u>0.00</u>
30 Aggregate Amount Payable/(Overpayment) (Sum of Items 29A and 29B)	30 <u>200.00</u>	

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/quarter

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 Authorized Representative, attach authorization letter and indicate TIN)

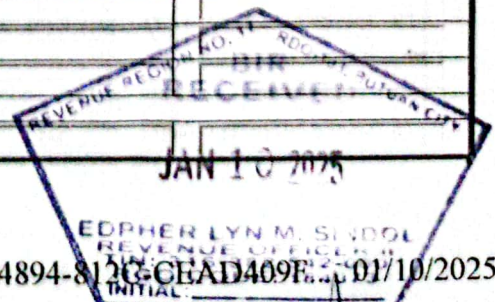
31 Number of Attachments 0

Printed Name and Signature of Taxpayer/Authorized Representative & TIN

PART III - DETAILS OF PAYMENT

Particulars	Drawee Bank/Agency	Number	Date (MM/DD/YYYY)	Amount
32 Cash/Bank Debit Memo				
33 Check				
34 Tax Debit Memo				
35 Others (specify below)				

Cher. #000033 P200.00



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Republika ng Pilipinas
Kagawaran ng Pananalapi
Kawanihan ng Rentas Internas

103 - BUTUAN CITY, AGUSAN DEL NORTE
184073 - 00013 - R.T.R. AGUSAN DEL
NORTE
REVENUE OFFICIAL RECEIPT
BIR Form No. 2524

ROR NO.: ROR202510318407300013-000033
DATE/TIME: 01/10/2025 02:45:19 PM

TIN: 717-814-123-00000

ESTER T. PABILLORE

RTR, ADN

FORM NO.: 1701A

TAX TYPE: IT

RETURN PERIOD: 12/31/2024

ASSESSMENT NO:

DUE DATE: 04/15/2025

PARTICULARS	AMOUNT
BASIC TAX	200.00
SURCHARGE	0.00
INTEREST	0.00
COMPROMISE	0.00
TOTAL PENALTIES	0.00

TOTAL AMOUNT DUE 200.00

TOTAL AMOUNT PAID 200.00
TWO HUNDRED PESOS ONLY

MANNER OF PAYMENT

PER RETURN

TYPE OF PAYMENT

FULL

MODE OF PAYMENTS

CASH

AMOUNT: 200.00

REMARKS

TAXPAYER COPY



This is to certify that the amount indicated herein has
been received by the undersigned

EDPHER LYN M SINDOL
Collection Section - RCO