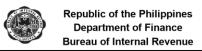
For BIR BCS/ Use Only Item:



BIR Form No. **2307**

Certificate of Creditable Tax Withheld at Source



	in all applicable spaces. M	lark all appropria	te hoves with	n an "Y"									230	07 01/16	BENCS
1		From	le boxes with		(MM/DI	D/YYYY)		То					(MM/DD	/YYYY,)
					Part I – F	Payee Info	rmation								
	2 Taxpayer Identification Number (TIN) 3 Payee's Name (Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual)														
3	Payee's Name (Last Nam	ne, First Name, M	liddle Name	<u>for Individu</u>	al OR Regi	stered Nar	ne for Non-	Individua	()						
4	Registered Address													4A ZII	Code
5	Foreign Address, if applic	cable													
	Part II – Payor Information														
6	Taxpayer Identification Number (TIN)														
7	Payor's Name (Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual)														
8	Registered Address	dress 8A ZIP Code													
Part III – Details of Monthly Income Payments and Taxes Withheld															
AMOUNT OF INCOME DAYMENTS															
lr	ncome Payments Subject Withholding Ta		ATC		nth of the arter	2nd Mo	nth of the arter	3rd Mo	onth of th uarter		Total			ithheld Quarte	
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Tot	al			1						+		\dashv			
Money Payments Subject to Withholding of Business Tax (Government & Private)															
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Tot	al														
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	We declare under the penalties of perjury that this certificate has been made in good faith, verified by us, and to the best of our knowledge and belief, is true and correct, pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under authority thereof. Further, we give our consent to the processing of our information as contemplated under the *Data Privacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes.														
			nature over		ndicate Title	e/Designat			ative/Tax						
Tax Agent Accreditation No./ Attorney's Roll No. (if applicable)				Date of (MM/DD/	YYYY)					of Expiry D/YYYY)					
					C	ONFORME	1								
		Sign	nature over F						tative/Tax	Agent					
	Toy Agent Assessite the att	/		(I	ndicate Title		ion and TIN	<u> </u>	1	Data	f Exerted		T		
	Tax Agent Accreditation No.				Date of		, ,			Date o	f Expiry				