## INCOME PAYEE'S SWORN DECLARATION OF GROSS RECEIPTS/SALES (For Self-Employed and/or Engaged in the Practice of Profession with Several Income Payors)

	Ι, _			Name)		,	tizenship)	, of	legal age, s	ingle/ married to	
(Name of Sponse)					permanently residing at						
			(Name a) St	ouse)	(Askh	wee)				with	
Taxpayeı	r Ide	ntificat	ion Number (TIN)		121000		_, after havi	ng been duly s	worn in acc	ordance with lav	
hereby de	epos	se and s	tate:								
	1.	That	I derived my	business/professional)	income fro	m various i		rs, and my regi		ness address is at	
			(Business	Address)						<b>—</b> '	
	2.			, my gross. For this purpose, I						I that I am a non-	
			income. With this rate; subject to p	e Tax Rates under S s selection, I acknow ercentage tax and w case of government	ledge that I ar	n subject to Juired perce	o creditable v	withholding tax	at the pres-	cribed	
			receipts/sales and graduated income	6) income tax rate un other non-operating tax rates and the Po e income withholdin	g income - wi ercentage Tax	th this sele- under Sect	ction, I unde tion 116 of the	erstand that this	s is in lieu	of the	
	3.	That based on my selection above, if my gross sales/receipts and other non-operating income exceeds \$\mathbb{P}3,000,000, my income payor /withholding agents shall automatically withhold the higher rate of withholding of ten percent (10%) in the case of income items with two (2) prescribed creditable withholding tax rate depending on the total amount of income payment received:									
		a.	tax (VAT) unless	ted Income Tax Rate expressly exempted; nent entity, business	and conseque	ently subjec	t to withhold				
		b.	option since my	ercent (8%) income income exceeds P ly together with the	3,000,000 and	d thus, the	graduated	income tax ra			
•	4.		duly execute this t ue Regulations No.	SWORN DECLAR ;	ATION in co	mpliance w	vith the requ	irement prescr	ibed under	Section of	
:	5.		declare, under the p lief to be true and c	enalties of perjury, the orrect.	hat this declara	ation has be	en made in g	ood faith, and	to the best o	f my knowledge	
]	IN V	WITNE	SS WHEREOF, I	have hereunto set m	y hand this	_day of		, 20 at		Philippines	
							Signature over I	Printed Name of Indivi	dual Taxpayer		
	SUE	SCRIE	BED AND SWOR	N to before me this	day of	+	, 20	in			
Applicant	exm	ibitea to	me nis/ner	iovernment Issued II) and No.	) issued a			011			
Doc. No.:						NOTA	RY PUBLIC	C			
nge No.:											
Series of											
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				(To be filled-out b	y the withholo	ding agent/	lone payor)				
Date Rece	ivec		DD-YYYY-00001)	R	teceived by:	10)					
					Sign	ature over Printe	ed Name of the Wit	hholding Agent/Payor	or Authorized ()	fficer	
							Designation/Position	on of Authorized Office	r		
						0.	Name of Withhold	ing Agent/Lone Payor			

## INCOME PAYEE'S SWORN DECLARATION OF GROSS RECEIPTS/SALES (For Self-Employed and/or Engaged in the Practice of Profession with Lone Income Payor)

I,			(Name)	,	(Citizenship	1	, of leg	al age, single/ married t		
				permanently residing at						
		(Name of S	pouse)					with		
Taxpayer Id	lentifica	tion Number (TIN)		(Addre		er having be	en duly swor	n in accordance with la		
hereby depo	se and s	state:								
1.	That	I derived my income only from (Name of Lone Payor)								
	with	Taxpayer Identific	ation Number		and busine	ss address at	Tanke of Lone rays			
2.	that I	That for the current year, my gross receipts will not exceed Two Hundred Fifty Thousand Pesos (\$\mathbb{P}\$250,000.00) and that I am registered as a non-VAT taxpayer; that whatever is the amount of income received, I will comply with the requirement to file my Income Tax Return on the prescribed due date. For this purpose, I opt to avail of either one of the following:								
		income. With thi withholding tax;	ne Tax Rates under to s selection, I acknow subject to percentage alding percentage tax	vledge that I am : ge tax, if applica	subject to 0% in ble, and will file	come tax, thue the require	is, not subjec	t to creditable		
		receipts/sales and	%) income tax rate u I other non-operatin e tax rates and the F ix shall be made;	ng income - with	this selection,	I understand	that this is	in lieu of the		
3.	3. That based on my selection above, if my gross sales/receipts and other non-operating income exceeds \$\textstyle{250,00}\$ \$\textstyle{250,000,000.00}\$, my afore-stated lone income payor shall automatically withhold the prescribed rate of withhold the p									
	a. In case of Graduated Income Tax Rates, I acknowledge that aside from income tax, I a tax (Percentage Tax, if applicable) and creditable withholding of income in excess business tax withholding, if any, are applicable on the entire income payment; OR						cess of P250			
	b.		ercent (8%) income			m only subje	ct to income	tax and thus,		
4.	That I Reven	duly execute this ue Regulations No	SWORN DECLAF	RATION in con	apliance with th	e requireme	nt prescribed	under Section of		
5.		declare, under the p		that this declarat	ion has been ma	de in good fa	ith, and to th	e best of my knowledge		
IN	WITNE	SS WHEREOF, I	have hereunto set n	ny hand this	day of	, 20	at	, Philippines		
					Signal	ire over Printed No	ame of Individual 7	"ахрауег		
SUI	BSCRII	BED AND SWOR	N to before me this	day of _ issued at	, 2	20 in	ол			
		(	Government Issued ID and No	s.)	NOTARY P					
oc. No.: nge No.: ook No.:										
Affix 130.00 Documentar Stamp Tax	y									
	i				<u></u>					
			(To be filled-out	by the withholdi	ng agent/lone p	ayor)				
ate Receive	d: <i>(MM-)</i>	DD-YYYY-00001)	I	Received by:						
				Signati	ure over Printed Name	of the Withholding	Agent/Payor or Au	thorized Officer		
					Designation	on/Position of Aut	orized Officer			
					Name of	Withholding Agen	VLone Payor			