



**Certificate of Compensation** BIR Form No. 2316 Payment/Tax Withheld
For Compensation Payment With or Without Tax Withhe January 2018 (ENCS) Fill in all applicable space

1 For the Year
(YYYY) 2 For the Period 03/08 12/31 2021 To (MM/DD) From (MM/DD)

Part I - Employee Information Part IV-B Details of Compensation Income & Tax Withheld from Present Employer			
	666 - 000	A. NON-TAXABLE/EXEMPT COMPENSATION INCOME	Amount
4 Employee's Name (Last Name, First Name, Middle Name)	5 RDO Code	27 Basic Salary (including the exempt P250,000 & below)	
GO, ZACHARY SEE 126		or the Statutory Minimum Wage of the MWE	-
6 Registered Address 6A ZIP Code		28 Holiday Pay (MWE)	-
#15 F. Llamas St., Basak San Nicolas, Cebu City 6000 -		29 Overtime Pay (MWE)	-
6B Local Home Address 6C ZIP Code			
		30 Night Shift Differential (MWE)	-
6D Foreign Address		31 Hazard Pay (MWE)	-
		32 13th Month Pay and Other Benefits	28,713.19
7 Date of Birth (MM/DD/YYYY) 8 Contact Number		(maximum of P90,000)	
12/28/1972		33 De Minimis Benefits	20,748.27
9 Statutory Minimum Wage rate per day		34 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only)	17,541.80
3		35 Salaries and Other Forms of Compensation	-
		36 Total Non-Taxable/Exempt Compensation	67,003.26
Part II - Employer Information ( <i>Present</i> )  12 TIN 002 - 726 - 207 - 000		Income (Sum of Items 27 to 35)	07,003.20
13 Employer's Name			
WESERV SYSTEMS INTERNATIONAL, INC.		37 Basic Salary	325,727.70
14 Registered Address	14A ZIP Code	38 Representation	-
11/F TWO   NEO BLDG., 3RD AVE. COR. 28TH ST.   GLOBAL CITY, TAGUIG CITY	BONIFACIO 1634	39 Transportation	-
15 Type of Employer X Main Employer  Part III - Employer Information	Secondary Employer	40 Cost of Living Allowance (COLA)	-
16 TIN	-	41 Fixed Housing Allowance	-
17 Employer's Name		42 Others (specify)	
18 Registered Address 18A ZIP Code		42A Other Earnings	98,348.13
16 Redistered Address	16A ZIP Code	42B	-
Part IVA - Summary		SUPPLEMENTARY	
19 Gross Compensation Income from Present 491,079.09		43 Commission	-
Emplover (Sum of Items 36 and 50) 20 Less: Total Non-Taxable/Exempt Compensation 67,003.26		44 Profit Sharing	-
Income from Present Employer (From Item 36)  21 Taxable Compensation Income from Present	424,075.83	45 Fees Including Director's Fees	-
Employer (Item 19 Less Item 20) (From Item 50)			
Add: Taxable Compensation Income from Previous Employer. if applicable	73,993.39	46 Taxable 13th Month Benefits	-
Gross Taxable Compensation Income (Sum of Items 21 and 22)	498,069.22	47 Hazard Pay	-
24 Tax Due	54,517.31	48 Overtime Pay	-
25 Amount of Taxes Withheld		49 Others (specify)	
25A Present Employer	54,517.31	49A	-
25B Previous Employer, if applicable	-	49B	-
26 Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B)	54,517.31	50 Total Taxable Compensation Income (Sum of Items 37 to 49B)	424,075.83
I/We declare, under the penalties of perjury that this certificat	e has been made in good faith, verified b	by me/us, and to the best of my/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, I/we give my/our consent to the processing of my/our information as contemplated under the "Data Privacy Act of 2012" (R.A. No. 10173) for legitimate and lawful purposes.			
51 ARISTEO A. CATALUNA Present Employer/Authorized Agent Signature over Printed Name			
CONFORME:			
52 ZACHARY S. GO Employee Signature over Printed Name		Date Signed	Amount paid, if CTC
CTC/Valid ID No.	Place of	Date Signed	1 1
of Employee	Issue To be accomplished u	nder substituted filing	
I declare, under the penalties of perjury that the information herein stated are reported under BIR Form No. 1604-C which has been filed with the Bureau of Internal Revenue.		I declare, under the penalties of perjury that I am qualified under substituted filing of Income Tax Return (BIR Form No. 170), since I received purely compensation income from only one employer in the Philippines for the calendar year; that taxes have been correctly withheld by my employer (ax due equals tax withheld); that the BIR Form No. 1604-C filed by my employer to the BIR shall constitute as my income tax return; and that BIR	
53ARISTEO A. CATALUNA  Present Employer/Authorized Agent Signature over Printed Name		Form No. 2316 shall serve the same purpose as if BIR Form No. 1700 has been filed pursuant to the provisions of Revenue Regulations (RR) No. 3-2002, as amended.	
Present Employer/Authonzed Agent Signature over Printed Name (Head of Accounting/Human Resource or Authorized Representative)		54 ZACHARY S. GO Employee Signature over Printed Name	