## Tax Return Receipt Confirmation

From: ebirforms-noreply@bir.gov.ph

To: egateinc@yahoo.com

Date: Tuesday, 3 March 2020, 09:20 GMT+8

This confirms receipt of your submission with the following details subject to validation by BIR:

File name: 009590900000-0619E-022020.xml

Date received by BIR: 3 March 2020 Time received by BIR: 08:30 AM

Penalties may be imposed for any violation of the provisions of the NIRC and issuances thereof.

## FOR RETURNS WITH PAYMENT

Please print this e-mail together with the RETURN and proceed to pay through the Authorized Agent Bank / Collection Agent / GCASH or use other payment options.

This is a system-generated email. Please do not reply.

Bureau of Internal Revenue

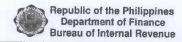
DISCLAIMER

This email and its attachments may be confidential and are intended solely for the use of the individual or entity to whom it is addressed.

If you are not the intended recipient of this email and its attachments, you must take no action based upon them, nor must you disseminate, distribute or copy this e-mail. Please contact the sender immediately if you believe you have received this email in error.

E-mail transmission cannot be guaranteed to be secure or error-free. The recipient should check this email and any attachments for the presence of viruses. The Bureau of Internal Revenue does not accept liability for any errors or omissions in the contents of this message which arise as a result of e-mail transmission.

For BIR BCS/ Use Only Item:



BIR Form No. **0619-E** 

## Monthly Remittance Form of Creditable Income Taxes Withheld (Expanded)



January 2018

Page 1	Enter all required inform Tw	ation in CAPITAL LETTER o copies MUST be filed wi	RS using BLAC	CK ink. Me	ark all a	applicable Tayraya	boxes with an	*X*.		061	9-E (	1/18
1 For the Month of (M	Two copies MUST be filed with the BIR and one held by the Month of (MMYYYY) 2 Due Date (MM/DD/YYYY) 3 Amended Form?					4 Any Taxes Withheld? 5 ATC 6 Tax Type C						
0 2 2 0 2	0 0 3 1	0 2 0 2 0	Yes	X	No	X	7	No	WME10			/E
		Part I -	- Backgrou	and Info	orma	tion	·					
7 Taxpayer Identificat	ion Number (TIN)	0 0 9	<b>590</b>		9 0		000		8 RDO Co	do	5 4	R
9 Withholding Agent's Name (Last Name, First Name, Middle Name for Individual OR Registered Name							2	dual)	B NDO CO	ue	3 4	
egate inc.								July 1	***************************************			
10 Registered Address	S (Indicate complete address	If branch, indicate the branch addre	ess. If the registered	address is d	ifferent fr	om the current	t address, go to the	RDO to upo	date registered address	by using BIR I	Form M	1905)
U-E NANAY N	ORA BUILDI	NG CENTENN	IAL RO	AD G	AH.	AK K	AWIT C	AVIT	E	, , , ,		
								-	10A ZIP C	ode .	4 1	0.4
11 Contact Number 09175178084 12 Category of Withholding							Acent	X	Private			
13 Email Address			1			moromy	ngent		rivate		DVei	nmen
egateinc@yah	loo.com											
		Pa	rt II – Tax F	Remitta	nce						_	
14 Amount of Remitta	nce								<del></del>	4 400		
15 Less: Amount Remitted from Previously Filed Form, if this is an amended form										1,100	- Binageningale	00
16 Net Amount of Remittance (Item 14 Less Item 15)										0		00
17 Add: Penalties	intalice (nem 14 Les	s nem 15/								1,100		00
17A Surcharg	e											
17B Interest										0	•	00
17C Compromise										0		00
										0	AF STATE OF THE ST	00
17D Total Penalties (Sum of Items 17A to 17C)										0	*	00
18 Total Amount of R										1,100		00
VWe declare under the penso the provisions of the National contemplated under the Data	alties of perjury that this re Internal Revenue Code, a	mittance form has been mades amended, and the regulation	de in good faith, ions issued und	verified b	y me/us ty there	s, and to the	e best of my/ou	r knowled	dge and belief, is t	rue and cor	rect, p	ursuan
contemplated under the Data Individual:	a Privacy Act of 2012 (R.A.	No. 10173) for legitimate a	nd lawful purpos	ses. (II AUI	trionzet	d Represen	tative, attach a	uthorizati	on letter)	g or myroun	114091	нанил
				1 0 1	1017 (1)	MITTINGELL.		1				
									h			
Signature							Julie		RETURN	E		
Signature over Printed N	ame of Taxpayer/Aut (Indicate Title/Designati	horized Representative on and TIN)	/ Tax Agent		Sig	gnature o	ver Printed I	Name o	President/Vic psentative/Tax	e Preside	nt/	
ax Agent Accreditation N	lo./		Data of	lacus	-T	7100101	(Indicate Til	tle/Desig	nation and TIN)	Agent		
Attorney's Roll No. (if applicable)  Date of Issue (MM/DD/YYYY)									of Expiry			
			I – Details	of Pay	ment							
Particulars  9 Cash/Bank Debit Memo	Drawee Bank/Agency	Number	Date	(MM/DD/YYYY)		Y)			Amount			
												!
0 Check								1.1	1 1 1	1 1		!
1 Tax Debit Memo		DEALER OF BEING	4									
2 Others (specify below)								1			• 1	
	1 1 1							1.1				
lachine Validation/Reven	ue Official Receipt De	etails (if not filed with an	Authorized Ag	gent Ban	ik)				g Office/AAB a			ceipt
							(RC	D's Sign	ature/Bank Tei	ler's Initia	ıl)	
							190	OAL IS	A 1 (10) (10)	101 (111)		1
TE: *Dinese reed the Sin	Date D							onon	1	M. P.M.		
TE: *Please read the BIF	Data Privacy Policy	round in the BIR websit	te (www.bir.g	jov.ph)				11.0	1	482		
								RE			-	1
									2011	419 manife		
									<b>₩</b> 19M	W 2020		