



BIR Form No. <b>0619-E</b> January 2018 Page 1	<h2 style="margin: 0;">Monthly Remittance Form</h2> <h3 style="margin: 0;">of Creditable Income Taxes Withheld (Expanded)</h3> <p style="font-size: small; margin: 5px 0;">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 Taxpayer.</p>	 0619-E 01/18 P1																									
<table style="width:100%; font-size: x-small;"> <tr> <td style="width:20%;">1 For the Month of (MM/YYYY)</td> <td style="width:20%;">2 Due Date (MM/DD/YYYY)</td> <td style="width:20%;">3 Amended Form?</td> <td style="width:20%;">4 Any Taxes Withheld?</td> <td style="width:10%;">5 ATC</td> <td style="width:10%;">6 Tax Type Code</td> </tr> <tr> <td>0 5 2 0 2 1</td> <td>0 6 1 0 2 0 2 1</td> <td><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> <td><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</td> <td>WME10</td> <td>WE</td> </tr> </table>			1 For the Month of (MM/YYYY)	2 Due Date (MM/DD/YYYY)	3 Amended Form?	4 Any Taxes Withheld?	5 ATC	6 Tax Type Code	0 5 2 0 2 1	0 6 1 0 2 0 2 1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	WME10	WE													
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<b>Part I – Background Information</b>																											
7 Taxpayer Identification Number (TIN)      0 0 9 - 5 9 0 - 9 0 0 - 0 0 0      8 RDO Code      5 4 B																											
9 Withholding Agent's Name (Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual) EGATE INC.																											
10 Registered Address (Indicate complete address. If branch, indicate the branch 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-E NANAY NORA BLDG., CENTENNIAL ROAD GAHAK KAWIT CAVITE																											
10A ZIP Code      1 3 0 0																											
11 Contact Number      0 9 1 7 5 0 7 8 0 8 4      12 Category of Withholding Agent <input checked="" type="checkbox"/> Private <input type="checkbox"/> Government																											
13 Email Address egateinc@yahoo.com																											
<b>Part II – Tax Remittance</b>																											
14 Amount of Remittance      1,100      00																											
15 Less: Amount Remitted from Previously Filed Form, if this is an amended form      0      00																											
16 Net Amount of Remittance (Item 14 Less Item 15)      1,100      00																											
17 Add: Penalties																											
17A Surcharge      0      00																											
17B Interest      0      00																											
17C Compromise      0      00																											
17D Total Penalties (Sum of Items 17A to 17C)      0      00																											
18 Total Amount of Remittance (Sum of Items 16 and 17D)      1,100      00																											
<p style="font-size: x-small;">I/We declare under the penalties of perjury that this remittance form has been made in good faith, verified 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. (If Authorized Representative, attach authorization letter)</p>																											
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<b>Part III – Details of Payment</b>																											
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19 Cash/Bank Debit Memo																											
20 Check																											
21 Tax Debit Memo																											
22 Others (specify below)																											
Machine Validation/Revenue Official Receipt Details (if not filed with an Authorized Agent Bank)																											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <b>RECEIVED</b>                      ENB-BACODR CITY-PANAPAN                      BANK CODE- 033519                      11-548                      Stamp of Receiving Office/AAB and Date of Receipt                      (RO's Signature/Bank Initial)                      TELLER: 2                 </div>																											

NOTE: \*Please read the BIR Data Privacy Policy found in the BIR website (www.bir.gov.ph)

**PNB****BTR-BIR PAYMENT  
SLIP**

PLEASE WRITE HEAVILY

DATE:

06 04 2021  
M M D D Y Y

Racoor City-Panapaan BRANCH is happy to serve you

You have made a BILLS PAYMENT

of PHP 1,100.00

on 06-04-2021 13:15:37

to BUREAU OF INTERNAL REVENUE

Payor : EGATE INC

Account no. 009590900000

Txn Ref#: 8852427971021060400034

Mode of Payment: Cash

Service Charge: PHP 0.00

Processed by ALICANTE, PATRICIA Seq# 227

Thank you for banking with us. With PNB, You First!

ACCOUNT NAME <b>BTR - BIR</b>		Taxpayer may confirm their Tax Payment with their Home RDO/LTDO (where they file tax returns and pay internal revenue taxes).
TAXPAYER'S NAME <b>Egate Inc</b>		
TIN <b>009 590 900 000</b>	TAX TYPE <b>ENT</b>	
TAX PERIOD <b>05/2021</b>	TAX FORM, <b>0619E</b>	

**MODE OF PAYMENT**☒ **CASH**

NOTES	QTY	AMOUNT	NOTES	QTY	AMOUNT
1,000			100		
500			50		
200			20		
TOTAL COINS			CASH PAYMENT		

☐ **CHECK**

CHECK PAYMENT

**110**☐ **DEBIT MY ACCOUNT NO.**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

AMOUNT IN FIGURES : \_\_\_\_\_

AMOUNT IN WORDS : \_\_\_\_\_

ACCOUNTHOLDER'S SIGNATURE

Signature Verified by:

Approved by:

ATTACHMENT TO TAX RETURN

FORM 2030.1 Mar '19