

<div style="display: inline-block; vertical-align: middle; text-align: left;"> Republika ng Pilipinas Kagawaran ng Pananalapi Kawanihan ng Rentas Internas </div>		Annual Information Return of Income Taxes Withheld on Compensation and Final Withholding Taxes		BIR Form No. 1604-CF July 2008 (ENCS)		
1 For the Year (YYYY) <u>2014</u>		2 Amended Return? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		3 No. of Sheets Attached? <u>1</u>		
Part I Background Information						
4 TIN <u>123-456789</u>		5 RDO Code <u>100</u>		6 Line of Business/Occupation <u>Other</u>		
7 Taxpayer's Name (Last Name, First Name, Middle Name for Individuals)/(Registered Name for Non-Individuals) <u>John Doe</u>				8 Telephone Number <u>0912345678</u>		
9 Registered Address <u>123 Main St, Manila</u>				10 Zip Code <u>1000</u>		
11 In case of over-withholding/overremittance after the year-end adjustment on compensation, have you released the refunds to your employees? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				If yes, specify the date of refund (mm/dd/yyyy) <u> </u>		
12 Total Amount of Overremittance on Tax Withheld under Compensation <u>0.00</u>		13 Month of First Crediting of Overremittance <u> </u>		14 Category of Withholding Agent <input checked="" type="checkbox"/> Private <input type="checkbox"/> Government		
Part II Summary of Remittances						
Schedule 1 Remittance per BIR Form No. 1601-C						
MONTH	DATE OF REMITTANCE	NAME OF BANK/BANK CODE/ROR NO., IF ANY	TAXES WITHHELD	ADJUSTMENT	PENALTIES	TOTAL AMOUNT REMITTED
JAN	01/01/2014		0.00	0.00	0.00	0.00
FEB	02/01/2014		0.00	0.00	0.00	0.00
MAR	03/01/2014		0.00	0.00	0.00	0.00
APR	04/01/2014		0.00	0.00	0.00	0.00
MAY	05/01/2014		0.00	0.00	0.00	0.00
JUN	06/01/2014		0.00	0.00	0.00	0.00
JUL	07/01/2014		0.00	0.00	0.00	0.00
AUG	08/01/2014		0.00	0.00	0.00	0.00
SEP	09/01/2014		0.00	0.00	0.00	0.00
OCT	10/01/2014		0.00	0.00	0.00	0.00
NOV	11/01/2014		0.00	0.00	0.00	0.00
DEC	12/01/2014		0.00	0.00	0.00	0.00
TOTAL			0.00	0.00	0.00	0.00
Schedule 2 Remittance per BIR Form No. 1601-F						
MONTH	DATE OF REMITTANCE	NAME OF BANK/BANK CODE/ROR NO., IF ANY	TAXES WITHHELD	PENALTIES	TOTAL AMOUNT REMITTED	
JAN			0.00	0.00	0.00	
FEB			0.00	0.00	0.00	
MAR			0.00	0.00	0.00	
APR			0.00	0.00	0.00	
MAY			0.00	0.00	0.00	
JUN			0.00	0.00	0.00	
JUL			0.00	0.00	0.00	
AUG			0.00	0.00	0.00	
SEP			0.00	0.00	0.00	
OCT			0.00	0.00	0.00	
NOV			0.00	0.00	0.00	
DEC			0.00	0.00	0.00	
TOTAL			0.00	0.00	0.00	
Schedule 3 Remittance per BIR Form No. 1602						
MONTH	DATE OF REMITTANCE	NAME OF BANK/BANK CODE/ROR NO., IF ANY	TAXES WITHHELD	PENALTIES	TOTAL AMOUNT REMITTED	
JAN			0.00	0.00	0.00	
FEB			0.00	0.00	0.00	
MAR			0.00	0.00	0.00	
APR			0.00	0.00	0.00	
MAY			0.00	0.00	0.00	
JUN			0.00	0.00	0.00	
JUL			0.00	0.00	0.00	
AUG			0.00	0.00	0.00	
SEP			0.00	0.00	0.00	
OCT			0.00	0.00	0.00	
NOV			0.00	0.00	0.00	
DEC			0.00	0.00	0.00	
TOTAL			0.00	0.00	0.00	
Schedule 4 Remittance per BIR Form No. 1603						
QUARTER	DATE OF REMITTANCE	NAME OF BANK/BANK CODE/ROR NO., IF ANY	TAXES WITHHELD	PENALTIES	TOTAL AMOUNT REMITTED	
1ST QTR			0.00	0.00	0.00	
2ND QTR			0.00	0.00	0.00	
3RD QTR			0.00	0.00	0.00	
4TH QTR			0.00	0.00	0.00	
TOTAL			0.00	0.00	0.00	
We declare, under the penalty of perjury, that this return 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. 19 _____ President/Vice President/Principal Officer/Accredited Tax Agent/Authorized Representative of Employer (Signature over printed Name) Title/Position of Signatory _____ TIR of Signatory _____ Tax Agent App. No./Atty's Roll No. (if Applicable) _____ Date of Issuance _____ Date of Entry _____					Stamp of Receiving Office and Date of Receipt 18 _____ Treasurer/Asst. Treasurer (Signature over printed Name) Title/Position of the Signatory _____ TIR of Signatory _____	