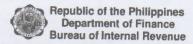
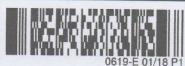
For BIR BCS/ Use Only Item:



BIR Form No.

0619-E

Monthly Remittance Form of Creditable Income Taxes Withheld (Expanded)



January 2018 Page 1							le boxes with an "X". 0619-E 01/18 P1					
1 For the Month of (MM/YYYY) 2 Due Date (MM/D			Amended			Taxes Withheld	? 5 ATC	6 Tax	6 Tax Type Code			
1 1 2 0 2	0 12 1	0 2020	Yes	X No	X	Yes No	WME10			/E		
		Part I –	Backgroun	d Informat	tion							
7 Taxpayer Identificati	ion Number (TIN)	0 0 9	5 9 0	_ 9 0	Manager	000	8 RDO Code	.	5 4 E	8		
9 Withholding Agent's Name (Last Name, First Name, Middle Name for			for Individual	OR Registere	d Name t	for Non-Individual)	01100 000		J T .			
EGATE INC.				9		J. Horriday						
10 Registered Address	S (Indicate complete address.	If branch, indicate the branch address	s, If the registered ac	dress is different fro	om the curren	t address, go to the RDO to t	update registered address b	v usina BIR F	om No	1905)		
U-E NANAY NOR	RA BLDG., CEN	TENNIAL ROAD	GAHAK,	KAWIT	AVITE	9						
							10A ZIP Co	de 4	1 1 0	4		
11 Contact Number 09175078084				iony of With	boldina	Agent IX						
13 Email Address					moluling	videur [v	Private [GC	overr	nment		
egateinc@yahoo	o.com											
		. Pari	t II – Tax Re	mittance								
14 Amount of Remittar	nce		III TUXTIC	imitalice				4 400				
15 Less: Amount Rem	15 Less: Amount Remitted from Previously Filed Form, if this is an amended form							1,100	•	00		
								0	•	00		
16 Net Amount of Remittance (Item 14 Less Item 15) 17 Add: Penalties								1,100		00		
17A Surcharge	е											
17B Interest						0 . 00						
						0 . 00						
17C Compromise						0 . 00						
'7D Total Penalties (Sum of Items 17A to 17C) 18 Total Amount of Remittance (Sum of Items 16 and 17D)							0 00					
								1,100		00		
to the provisions of the National as contemplated under the Data		mittance form has been made as amended, and the regulation No. 10173) for legitimate and						e and con of my/our	rect, p	ursuant nation		
For Individual:	a Fillyacy Act of 2012 (ThA	No. 10173) for regitimate and	d lawrul purpose	For Non-In	d Hepresei	ntative, attach authoriz	ation letter)					
						ANNE Lin	(11010)					
Signature over Printed N	ame of Taxpaver/Aut	horized Representative/	Tay Agent	Çi	1	over Printed Name		Dana'd-	-1/			
	(Indicate Title/Designation	on and TIN)	rexrigon	O.	Autho	rized Officer or Re	presentative/Tax	Agent	HW			
Tax Agent Accreditation N			Date of I	ssue			e of Expiry					
Attorney's Roll No. (if applic	able)		(MM/DD/Y			(MI	M/DD/YYYY)					
Particulars	Drawee Bank/Agency	Part III Number	- Details o	of Payment (MM/DD/YYY	PERSONAL PROPERTY AND ADDRESS OF THE PARTY O		Amount					
19 Cash/Bank Debit Memo		* I I I I I I	Date	(WIWI/DD/TTT	1)		Amount					
20 Check									•			
21 Tax Debit Memo						BEAL			•			
22 Others (specify below))					KIRCHE	MIN			1		
					PNB	BACOOR C	TVDANADA					
Machine Validation/Reven	nue Official Receipt D	etails (if not filed with an)	Authorized Ag	ent Bank)			ine Office/AAB an	nd Date o	of Re	ceint		
					RDC	Ktampo Repeix (RO's Si	ghature/Bank Pell	er's Initia	al)	ourpt		
						and the Between and	54B					
					UAT	E: DEC	0 9 2020					

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

PIB BTR-BIR F	PAYMENT DATE:								
PLEASE WRI	TE HEAVILY M M DOD THY								
Online									
Bacoor City-Panapaan BRANCH is happy to serve you									
You have made a BILLS PAYMENT on 12-10-2020 09:19:59									
to BUREAU OF INTERNAL REVENUE									
Payor : EGATE INC									
Account no. 009590,9000000 Txn Ref#: BBS2427971020121000002									
Mode of Payment: Cash									
Service Charge: PHP 0.00									
De good by DAVIDAN ADDITAN N. A. B. O.									
Proceed by PAYURAN, ADRIAN M. Seq# 24 Thank you for banking with us. With PNB, You First!									
Them you for building with dos with the, four tires.									
H 0616 UTO 1021									
ACCOUNT NAME	Taxpayer may confirm their Tax Payment with								
BTR - BIR their Home RDO/LTDO (where they file tax returns and pay internal revenue taxes).									
TAXPAYER'S NAME									
TIN TAX TYPE									
TAX PERIOD	TAX FORM								
MODE OF PAYMENT									
CASH									
NOTES QTY AMOUNT	NOTES QTY AMOUNT								
1,000	100								
500	50								
200 TOTAL COINS	20								
TOTAL COINS	CASH PAYMENT								
CHECK	CHECK PAYMENT								
DEBIT MY ACCOUNT NO.									
AMOUNT IN FIGURES :									
AMOUNT IN WORDS :									
Basel Colored Colored									

BANK'S COPY

FORM 2030.1 Mar '19