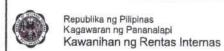
► DLN:



## **Payment Form**

BIR Form No. 0605 July 1999 (ENCS)

The same of the sa									
Fill in all applicable spaces.	Mark all appropris	ate boxes with	an "X"						
7 Return Period (MM / DD / )		2nd 3rd ype Code	4th		(To be filled	Attach	<u> </u>	6 ATC	
[7, 2] 3, 1   2, 0	16,0								
Part I		Backgrou			Assessment of the latest of th				
9 Taxpayer Identification No.	r	10 RDO 0		cpayer Clas	sification	12 Line of Bu	siness/Occ	upation	
430 473	5,1,2	<u> </u>	5	L N			177		
13 Taxpayer's 13 Name MEHDO 2A, LOMILSON, ISERTULEO  (Last Name, First Name, Middle Name for Individuals) / (Registered Name for Non-Individuals)							14 Telephone Number		
15 Registered Address - BROY. C9, RAWIS, ANIBONS, TACLOBAR C177								6,6,0,0	
► 17 Manner of Payment								▶ 18 Type of Payment	
Voluntary Payment  Self-Assessment  Penalties  Per Audit/Delinquent Account  Preliminary/Final Assessment/Deficiency Tax  Tax Deposit/Advance Payment  Income Tax Second Instellment  (Individual)  Others (Specify)							Installment  No. of Installment  Partial  Payment  Full  Payment		
Part II		Computat	tion of 1	ах					
19 Basic Tax / Deposit / Adv. 20 Add: Penalties Surchard		Interest		Compromis	e 19			•	
20A	20B		20C		20				
					21				
21 Total Amount Payable (S	um of items 19 & zuc	"							
made in good faith, verified by me, and to the best of my knowledge and belief, is true and correct, pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under					From Audit/Investigation/ Office			Stamp of Receiving Office and Date of Receipt	
Part III		Details o	f Payme	nt				The state of	
Particulars Drawee Bank	Agency N	umber	MM DD	YYYY			Amour	nt	
23 Cash/Bank Debit Memo		THE VOLUME			23				
24A	24B	24C		1	240				
24 Check >	25A	25B			250				
25 Tax Debit Memo	>	•							
26A 26 Others	26B	26C		10 340	26D			•	
Machine Validation/Revenue Of	ficial Receipt Details	(If not filed with the	ne bank)						