NATIONAL TELECOMMUNICATIONS COMMISSION Statement of Account

To: The Accountant:	a								No:				
io. me recountant.								(RC Cod	e - Year of		1o Series	of the R	C)
Please issue Order of Payment in favor for payment of the fees indicated below										Date:			
Г.	NEW		Імор							MA			-
F	REN	⊢	DUP			H	CO CV		H	ROC			
L	7 1/1/14	-	OTHERS			H	MS		H		;		
		_	JOTTILIO				1415			OTTIENS			-
Code Description	Particular:				Particular:			Particular:					
	Period Covered: 1 Year				Period Covered:				Period Covered:				
	No. of	1	No. of		No. of		No. of		No. of		No. of		SUB- TOTAL
	Years	%	Units	Fees	Years	%	Units	Fees	Years	%	Units	Fees	IOIAL
FOR LICENSES													
4-02-01-010 Permit to Purchase													0.00
4-02-01-130 Filing Fee													0.00
4-02-01-010 Permit to Possess/Storage													0.00
4-02-01-010 Construction Permit Fee													0.00
4-02-01-060 Radio Station License													0.00
4-02-01-100 Inspection Fee											1		0.00
4-02-01-080 Spectrum User's Fee (SUF)	-												0.00
Fines/Penalties/Surcharges Radio Station License													0.00
4-02-01-140 Spectrum User's Fee (SUF)													
FOR PERMITS													
4-02-01-010 Permit Fees													0.00
4-02-01-100 Inspection Fee													0.00
4-02-01-130 Fillling fee													0.00
4-02-01-140 Fines/Penalties/Surcharges													0.00
FOR AMATEUR AND ROC	-				-		1				1		
4-02-01-060 Radio Station License											-		0.00
4-02-01-060 Radio operator's Cert													0.00
4-02-01-130 Application Fee													
4-02-01-040 Seminar Fee Fines/Penalties/Surcharges/	+										1		0.00
Radio Station License Radio													0.00
4-02-01-140 Operator's Cert.											-		
4-02-01-080 Permit to Purchase	+				_						1		0.00
OTHER APPLICATION	+										1		0.00
4-02-01-020 Registration Fee Supervision & Regulation	+												0.00
4-02-01-070 Fee													0.00
4-02-01-040 Verification/Authentication													24.00
4-02-01-030 Examination Fee													0.00
4-02-01-040 Clearance/Certification Fee													0.00
4-02-01-060 Modification Fee													0.00
Miscellaneous Income 4-02-01-990 (DUPLICATE)													0.00
Documentary Stamp Tax	1												30.00
4-02-01-010 (DST)		-		-							-		0.00
Others	:	-	_	-	_				-		-		0.00
TOTA	Ч	<u> </u>		<u> </u>							1		54.00
	Mater	To be	anid on	hafar-			06/19/	2025	asham: !-	a audal	t to roo		
	Note:	To be p	oaid on or	before			06/18/2	2025	_otherwis	e subjec	t to reass	essment	

REMARK/S

- 1. Use additional sheets, if necessary to show detailed computation
- 2. Payment should be made in CASH, MANAGER'S/CASHIER'S CHECK. DEMAND DRAFT Payable to NTC-13 FAO BUREAU OF TREASURY,
- 3. PLEASE ATTACH 1x1 ID PICTURE UPON APPLICATION FOR NEW/RENEWAL

PREPARED BY:		APPROVED BY:		
	evaluator3 edge		eod3 edge	