

NATIONAL TELECOMMUNICATIONS COMMISSION  
Statement of Account

To: The Accountant:

CHONG HUA HOSPITAL  
MANDAUE AND CANCER  
CENTER

No: **61-2025-08-0694**  
(RC Code - Year of Issue- Mo.- Series of the RC)

Please issue Order of Payment in favor of  
for payment of the fees indicated below:

Date: **August 27 2025**

☒ NEW  
☐ REN

☐ MOD  
☐ DUP  
☐ OTHERS

☐ CO  
☒ CV  
☐ MS

☐ MA  
☐ ROC  
☐ OTHERS

Code	Description	Particular: FX-ROVII-02559-25				Particular:				Particular:				SUB-TOTAL
		Period Covered: AUG 27, 2025 to AUG 26, 2026				Period Covered:				Period Covered:				
		No. of Years	%	No. of Units	Fees	No. of Years	%	No. of Units	Fees	No. of Years	%	No. of Units	Fees	
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													480.00
4-02-01-100	Inspection Fee													480.00
4-02-01-080	Spectrum User's Fee (SUF)													0.00
	Fines/Penalties/Surcharges													0.00
4-02-01-140	Radio Station License													0.00
	Spectrum User's Fee (SUF)													0.00
FOR PERMITS														
4-02-01-010	Permit Fees													0.00
4-02-01-100	Inspection Fee													0.00
4-02-01-130	Filing fee													0.00
4-02-01-140	Fines/Penalties/Surcharges													0.00
FOR AMATEUR AND ROC														
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													0.00
4-02-01-040	Seminar Fee													0.00
	Fines/Penalties/Surcharges/													0.00
	Radio Station License Radio													0.00
4-02-01-140	Operator's Cert.													0.00
4-02-01-080	Permit to Purchase													0.00
OTHER APPLICATION														
4-02-01-020	Registration Fee													0.00
	Supervision & Regulation													0.00
4-02-01-070	Fee													0.00
4-02-01-040	Verification/Authentication													0.00
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													0.00
4-02-01-990	(DUPLICATE)													0.00
	Documentary Stamp Tax													30.00
4-02-01-010	(DST)													0.00
Others														0.00
TOTAL														1,022.00

Note: To be paid on or before **08/27/2025** otherwise subject to reassessment

☐ For Assessment only

☐ Endorsed for Payment

REMARK/S

1. Payment should be made in CASH, MANAGER'S/CASHIER'S CHECK. DEMAND DRAFT Payable to NTC-VII FAO BUREAU OF TREASURY

O.R.	No.	
	AMOUNT:	
	Date:	
	By:	

PREPARED BY:

**ROMEO JR. FORMENTERA**  
ENGINEER II

APPROVED BY:

**FELIPE GUMALO**  
ENGINEER V