NATIONAL TELECOMMUNICATIONS COMMISSION Statement of Account

												No: Issue- Mo Series of the RC)			
Please issue Order of Payment in favor of for payment of the fees indicated below:											Date:				
	_	NEW MOD REN DUP OTHERS				co cv ms				MA ROC OTHERS				-	
		Particula				Particular:				Particula					
														1	
Code	Description	Period Covered: 1 Year				Period Covered:				Period Covered:				SUB-	
		No. of Years	%	No. of Units	Fees	No. of Years	%	No. of Units	Fees	No. of Years	%	No. of Units	Fees	TOTAL	
	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	
1	Construction Permit Fee													0.00	
4-02-01-060												-		0.00	
4-02-01-100		-					_					-		0.00	
4-02-01-080	Fines/Penalties/Surcharges													0.00	
4-02-01-140	Radio Station License Spectrum User's Fee (SUF)														
	FOR PERMITS													1	
4-02-01-010	Permit Fees	1												0.00	
	Inspection Fee													0.00	
4-02-01-130														0.00	
	Fines/Penalties/Surcharges													0.00	
	AMATEUR AND ROC														
4-02-01-060	Radio Station License													0.00	
	Radio operator's Cert													0.00	
	Application Fee													0.00	
	Seminar Fee													0.00	
	Fines/Penalties/Surcharges/													0.00	
	Radio Station License Radio														
	Operator's Cert. Permit to Purchase	-				-				<u> </u>		1		0.00	
	HER APPLICATION	†				 				1		+		0.00	
4-02-01-020	Registration Fee	 								1				0.00	
4-02-01-070	Supervision & Regulation													0.00	
	Fee Verification/Authentication	-												0.00	
4-02-01-030	Examination Fee													50.00	
4-02-01-040	Clearance/Certification Fee													0.00	
4-02-01-040	Modification Fee											1		0.00	
4-02-01-990	Miscellaneous Income (DUPLICATE)													0.00	
	Documentary Stamp Tax (DST)													0.00	
17.02.01.010.	Others (ADMIN FINES)	1												0.00	
	TOTAL													50.00	
Note: To be paid on or before TODAY otherwise subject to reassessment For Assessment only Endorsed for Payment 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 LIST OF NAMES:															
PLEASE SE	E ATTACHED NAMES AT	THE BAC	K												

PREPARED BY: APPROVED BY: