## NATIONAL TELECOMMUNICATIONS COMMISSION Statement of Account

To: The Accountant:			No:						
			(RC Cod	e - Year of Issue- Mo Series of the RC)					
Please issue Order of Payment for payment of the fees indicate				Date:					
	NEW	MOD	со	MA					
	REN	DUP	CV	ROC					
		OTHERS	MS	OTHERS					

		Particular:			Particular:			Particular:						
Code Description	Period Covered:			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													<u> </u>
4-02-01-010	Permit to Purchase													
4-02-01-130														
4-02-01-010	Permit to Possess/Storage													
4-02-01-010	Construction Permit Fee													
4-02-01-060	Radio Station License													
4-02-01-100	Inspection Fee													
	Spectrum User's Fee (SUF)													
	Fines/Penalties/Surcharges Radio Station License													
	Spectrum User's Fee (SUF)													
	FOR PERMITS													
4-02-01-010	Permit Fees					1								
4-02-01-100	Inspection Fee													
	Fillling fee													
	Fines/Penalties/Surcharges													
FOR A	MATEUR AND ROC													
4-02-01-060	Radio Station License													
4-02-01-060	Radio operator's Cert													
4-02-01-130	Application Fee													
4-02-01-040	Seminar Fee													
	Fines/Penalties/Surcharges/ Radio Station License Radio													
	Operator's Cert.													
	Permit to Purchase													
OTH	IER APPLICATION													
4-02-01-020	Registration Fee													
	Supervision & Regulation													
	Fee	-				-				-				-
	Verification/Authentication	-			-	-								├
	Examination Fee			_	-		_			<b>-</b>		+		$\vdash$
	Clearance/Certification Fee		-	_	-		$\vdash$			<b>-</b>		-	_	$\vdash$
	Modification Fee Miscellaneous Income	<del>                                     </del>				1	_			-		_		$\vdash$
	(DUPLICATE)					1								
	Documentary Stamp Tax													
4-02-01-010		-		-	-	-	_			-		-		-
	Others			-	-	-		-	<b> </b>	<b>_</b>		-	-	⊢—
	TOTAL	ı	1	I	1	ı	1	1		I	1	1	1	I

Note: To be paid on or before \_\_\_\_\_\_ 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

PREPARED BY:	APPROVED BY: