NATIONAL TELECOMMUNICATIONS COMMISSION Statement of Account

To: The Accountant:

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

NEW MOD CO MA
REN DUP CV ROC
OTHERS MS
OTHERS

		Particular: Period Covered: 1 Year				Particular: Period Covered:				Particular: Period Covered:				SUB-
Code	Description													
		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
4-02-01-010	Construction Permit Fee													0.00
4-02-01-060	Radio Station License													0.00
4-02-01-100	Inspection Fee													0.00
4-02-01-080	Spectrum User's Fee (SUF)													0.00
	Fines/Penalties/Surcharges													0.00
4-02-01-140	Radio Station License Spectrum User's Fee (SUF)													
	FOR PERMITS													
4-02-01-010	Permit Fees													0.00
	Inspection Fee													0.00
	Fillling fee													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													
	Seminar Fee													
	Fines/Penalties/Surcharges/													0.00
	Radio Station License Radio													
	Operator's Cert. Permit to Purchase											1		0.00
	THER APPLICATION					 						+		0.00
						 						+		0.00
4-02-01-020	Registration Fee Supervision & Regulation			 								+		0.00
4-02-01-070	Fee													0.00
	Verification/Authentication													0.00
4-02-01-030	Examination Fee													50.0
4-02-01-040	Clearance/Certification Fee													0.00
	Modification Fee													0.00
	Miscellaneous Income (DUPLICATE)													0.00
	Documentary Stamp Tax (DST)													0.00
	Others													0.00
	TOTAL													50.00

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,

For Assessment only

3. PLEASE ATTACH 1x1 ID PICTURE UPON APPLICATION FOR NEW/RENEWAL

PREPARED BY:	APPROVED BY:				
Duane Nico Cawaling	Carlo Mario Jacobe I				

Endorsed for Payment