## NATIONAL TELECOMMUNICATIONS COMMISSION Statement of Account

To: The Accountant:							No: (RC Code - Year of Issue- Mo Series of the RC)							
	Order of Payment in favor of the fees indicated below										Date:			
		NEW		1 мор				со			MA			
	-	REN	⊢	DUP			H	CV		H	ROC			
		INCIN	F	OTHERS			H	MS		H				
			_	JUINERS			. ⊔	IVIS		ш	OTHERS	·		
		Particul	or TEN	AD DOUL 1	024.25	Particula	ar.			Particula	r·			
			Particular: TEMP-ROIII-1021-25											
Code	Description	Period Covered: 1 Year			Period Covered:				Period Covered:				SUB-	
		No. of	%	No. of	Fees	No. of	%	No. of	Fees	No. of	%	No. of	Fees	TOTAL
		Years		Units		Years		Units		Years		Units		
	FOR LICENSES											-		
4-02-01-010	Permit to Purchase											-		0.00
	Filing Fee													0.00
4-02-01-010										-				0.00
4-02-01-010												-		0.00
4-02-01-060												1		0.00
4-02-01-100	Inspection Fee											-		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														0.00
	Fillling fee													0.00
	Fines/Penalties/Surcharges													0.00
FOR	AMATEUR AND ROC													
4-02-01-060	Radio Station License													0.00
	Radio operator's Cert													0.00
	Application Fee													
4-02-01-040														
	Fines/Penalties/Surcharges/													0.00
4 02 01 140	Radio Station License Radio Operator's Cert.													
4-02-01-080														0.00
	HER APPLICATION									<b>†</b>		1		
4-02-01-020	Registration Fee													0.00
	Supervision & Regulation													0.00
4-02-01-070	Fee													
4-02-01-040														0.00
4-02-01-030	Examination Fee													50.00
4-02-01-040	Clearance/Certification Fee											-		0.00
4-02-01-060	Modification Fee													0.00
4-02-01-990	Miscellaneous Income (DUPLICATE)													0.00
4-02-01-330	Documentary Stamp Tax									<u> </u>				0.00
4-02-01-010	(DST)													
	Others													0.00
	TOTAL							l						50.00
		Note: To be paid on or before <u>06/19/2025</u> otherwise subject to reassessment												
	For Assessment only Endorsed for Payment													
			For	Assessme	ent only					Er	ndorsed t	for Payme	ent	
REMARK/S														
	ional sheets, if necessary to					AND 00.	ET D-	blot- ***	C 13 F	0 011054	05.705	CLIDY		
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