NATIONAL TELECOMMUNICATIONS COMMISSION Statement of Account

					ent of Ac	count								
To: The Accountant:		USTP								No:				
		(RC Cod									e - Year of Issue- Mo Series of the RO			
								•						
Please issue Order of Payment in favor										_				
for payment of the fees indicated below	<i>/</i> :	_				_			_	Date:			-	
<u> </u>	NEW	╘	MOD			<u> </u>	со		_ ⊨	MA				
2	REN	ᆫ	DUP				cv		<u> </u>	ROC				
			OTHERS			. $ au$	MS			OTHERS	i			
			_				4							
	Particular:			Particular:				Particula	r:					
Code Description	Period Co	Period Covered: Years				Period Covered:				Period Covered:				
Beschiption	No. of	%	No. of	Fees	No. of	%	No. of	Fees	No. of	%	No. of	Fees	SUB- TOTAL	
	Years	%	Units	rees	Years	%	Units	rees	Years	%	Units	rees		
FOR LICENSES														
4-02-01-010 Permit to Purchase														
4-02-01-130 Filing Fee														
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														
4-02-01-080 Spectrum User's Fee (SUF)														
Fines/Penalties/Surcharges Radio Station License														
4-02-01-140 Spectrum User's Fee (SUF)														
FOR PERMITS														
4-02-01-010 Permit Fees	1													
4-02-01-100 Inspection Fee														
4-02-01-130 Fillling fee														
4-02-01-140 Fines/Penalties/Surcharges	1													
FOR AMATEUR AND ROC														
4-02-01-060 Radio Station License	1													
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 4-02-01-140 Operator's Cert.														
4-02-01-080 Permit to Purchase	1			_										
OTHER APPLICATION	+-				<u> </u>						\vdash			
4-02-01-020 Registration Fee											\vdash			
Supervision & Regulation	1													
4-02-01-070 Fee														
4-02-01-040 Verification/Authentication														
4-02-01-030 Examination Fee														
4-02-01-040 Clearance/Certification Fee														
4-02-01-060 Modification Fee														
Miscellaneous Income 4-02-01-990 (DUPLICATE)														
Documentary Stamp Tax														
4-02-01-010 (DST)												<u> </u>		
Others (ADMIN FINES)											_	<u> </u>		
тоты	_		<u> </u>		Ц		-	D.41V	Ц.	<u> </u>	1			
	Note:	To be	paid on or	before				DAY	_otherwis	e subjec	t to reass	essment		
		П.							П-					
DEATA DV/C		Fo	r Assessm	ent only					Er	ndorsed f	for Payme	:nt		
REMARK/S		-11 - 4												
Use additional sheets, if necessary to					AND	CT C		FC 40 =:	0 0110=	05	CLID:			
2. Payment should be made in CASH, M						⊩ F Paya	bie to N	IC-13 FA	D BUREAU	OF TREA	SURY,			
3. PLEASE ATTACH 1x1 ID PICTURE UPO		IIUN F	UK NEW/F	CENEWA	IL.									

LIST OF NAMES: PLEASE SEE ATTACHED NAMES AT THE BACK

PREPARED BY:	APPROVED BY: