NATIONAL TELECOMMUNICATIONS COMMISSION Statement of Account

To: The Accountant:							No: (RC Code - Year of Issue- Mo Series of the RC)								
Please issue Order of Payment in favor of															
for payment of the fees indicated below: Date:												•			
☑ NEW ☐ MOD						□ co				☐ MA					
☐ REN ☐ DUP						☐ cv				ROC					
			OTHERS				Ms			OTHERS					
	Particular:					Particular:				Particular:					
C- 4-	Description	Dariad Countain ALIC 07			6 08, 2025 to 6 07, 2028 Period Cove			wered:			Period Covered:				
Code	Description	No. of		No. of	 T	No. of	· · · · ·	No. of	1	No. of		No. of		SUB-	
		Years	%	Units	Fees	Years	%	Units	Fees	Years	%	Units	Fees	TOTAL	
	FOR LICENSES	icuis		Ornes		icuis		Omes		icuis		Units			
4-02-01-010	Permit to Purchase													0.00	
4-02-01-130						_								0.00	
4-02-01-010		-												0.00	
		+				-								0.00	
4-02-01-010 4-02-01-060	Radio Station License	-												0.00	
		-												0.00	
	Inspection Fee									-				0.00	
4-02-01-080	Spectrum User's Fee (SUF) Fines/Penalties/Surcharges													0.00	
	Radio Station License													"	
4-02-01-140	Spectrum User's Fee (SUF)														
	FOR PERMITS														
4-02-01-010	Permit Fees													0.00	
4-02-01-100	Inspection Fee													0.00	
4-02-01-130	Filing fee													0	
4-02-01-140														0.00	
FOR A	AMATEUR AND ROC														
4-02-01-060	Radio Station License													0.00	
4-02-01-060	Radio operator's Cert													180.00	
4-02-01-130	Application Fee													0.00	
4-02-01-040	Seminar Fee													20.00	
	Fines/Penalties/Surcharges/													0.00	
4-02-01-140	Radio Station License Radio														
4-02-01-140	Operator's Cert. Permit to Purchase	_				_								0.00	
	HER APPLICATION	1												0.00	
		1				 				1				0.00	
4-02-01-020	Registration Fee Supervision & Regulation	+				-		-						0.00	
4-02-01-070	Fee													0.00	
4-02-01-040	Verification/Authentication													0.00	
4-02-01-030	Examination Fee													0.00	
4-02-01-040														0.00	
4-02-01-060	Modification Fee													0.00	
	Miscellaneous Income													0.00	
4-02-01-990								-		<u> </u>				20.00	
4-02-01-010	Documentary Stamp Tax (DST)									1				30.00	
Others		"												0.00	
	TOTAL	Ü												240.00	
		Note:	To be p	oaid on or	before	•		08/08/2	2025	otherwis	e subject	to reass	essment		
											,				
For Assessment only Endorsed for Payment															
REMARK/S															
1. Payment should be made in CASH, MANAGER'S/CASHIER'S CHECK. DEMAND DRAFT Payable to NTC-IX FAO BUREAU OF TREASURY															