NATIONAL TELECOMMUNICATIONS COMMISSION Statement of Account

GMA RADIO 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: □ NFW П ма Пмор **✓** co **✓** REN DUP cv ROC OTHERS OTHERS Particular: Particular: Particular: AUG 04, 2025 to Period Covered: AUG 03, 2026 Period Covered: Period Covered: Code Description SUB-No. of No of No of No of No of No of TOTAL Fees % Fees Fees Years Units Years Units Years Units FOR LICENSES 0.00 4-02-01-010 Permit to Purchase 4-02-01-130 Filing Fee 0.00 0.00 4-02-01-010 Permit to Possess/Storage 0.00 4-02-01-010 Construction Permit Fee 960.00 4-02-01-060 Radio Station License 4-02-01-100 Inspection Fee 480.00 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 0 4-02-01-130 Filing fee 4-02-01-140 Fines/Penalties/Surcharges 0.00 FOR AMATEUR AND ROC 4-02-01-060 Radio Station License 0.00 0.00 4-02-01-060 Radio operator's Cert 4-02-01-130 Application Fee 4-02-01-040 Seminar Fee Fines/Penalties/Surcharges/ 0.00 Radio Station License Radio 4-02-01-140 Operator's Cert. 0.00 4-02-01-080 Permit to Purchase OTHER APPLICATION 4-02-01-020 Registration Fee 0.00 Supervision & Regulation 0.00 4-02-01-070 Fee 0.00 4-02-01-040 Verification/Authentication 4-02-01-030 Examination Fee 0.00 4-02-01-040 Clearance/Certification Fee 0.00 0.00 4-02-01-060 Modification Fee Miscellaneous Income 0.00 4-02-01-990 (DUPLICATE) Documentary Stamp Tax 30.00 4-02-01-010 (DST) Others 720 2,190.00 TOTAL

| REI | MARK/S | | | | |
|-----|--------------------------------|-----------------------------|----------------------|---------------------|-------------|
| 1. | Payment should be made in CASH | . MANAGER'S/CASHIER's CHECK | DEMAND DRAFT Pavable | to NTC-X FAO BUREAU | OF TREASURY |

To be paid on or before

For Assessment only

Note:

08/04/2025

__ otherwise subject to reassessment

Endorsed for Payment

| | | | PREPARED BY: | | APPROVED BY: |
|---|------|---------|----------------|--------------|----------------------|
| Г | | No. | 1112171112551. | JOEL SILADAN | C.() |
| (| O.R. | AMOUNT: | | | EDISSA JOLINA AMANTE |
| | ŀ | Date: | | | Engineer 5 |
| 1 | | By: | | | Engineer 5 |