## NATIONAL TELECOMMUNICATIONS COMMISSION Statement of Account

To: The Accountant:  No:  (RC Code - Year of Issue- Mo Series of the RC)										C)				
Please issue Order of Payment in favor of for payment of the fees indicated below:											_			
		NEW		мор			П	со			MA			-
		REN		DUP			П	CV		П	ROC			
	_			OTHERS				MS		П	OTHERS	i		
	Particular: TEMP-ROXI-1019-25 JUL 15, 2025 to				Particular:				Particular:					
Code	Description Period Covered: JUL 14, 20.									Period Covered:				
		No. of	%	No. of	Fees	No. of	%	No. of	Fees	No. of	%	No. of	Fees	SUB- TOTAL
		Years	/0	Units	rees	Years	/0	Units	rees	Years	/0	Units	rees	ļ
	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 4-02-01-100	Radio Station License													0.00
4-02-01-080	Inspection Fee Spectrum User's Fee (SUF)													0.00
	Fines/Penalties/Surcharges													0.00
4 02 04 440	Radio Station License													
4-02-01-140	Spectrum User's Fee (SUF) FOR PERMITS													
4-02-01-010														0.00
4-02-01-010 4-02-01-100	Permit Fees Inspection Fee													0.00
4-02-01-130	Fillling fee													0.00
4-02-01-140														0.00
	AMATEUR AND ROC													
4-02-01-060	Radio Station License													0.00
4-02-01-060	Radio operator's Cert													0.00
4-02-01-130	Application Fee													
4-02-01-040	Seminar Fee					_								
	Fines/Penalties/Surcharges/ Radio Station License Radio													0.00
4-02-01-140	Operator's Cert.													
4-02-01-080	Permit to Purchase					_								0.00
	HER APPLICATION	-				-	_			-		-		
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													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
4-02-01-010	Documentary Stamp Tax													0.00
	Others													0.00
	TOTAL													50.00
Note: To be paid on or before <u>07/15/2025</u> otherwise subject to reassessment														
For Assessment only Endorsed for Payment														
REMARK/S														
	ional sheets, if necessary to					AND DE	CT D	blot- •	C 13 F	O DI IDEA : .	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:
	Jerwil Carin	Angelica Panchito