NATIONAL TELECOMMUNICATIONS COMMISSION Statement of Account

To: The Accountant: No:														
									(RC Cod	e - Year of	Issue- M	lo Series	of the R	C)
Please issue Order of Payment in favor of for payment of the fees indicated below: Date:														
tor payment	or the rees maleated below		_	1										•
	<u> </u>	NEW	⊢	MOD DUP			⊢	CO		닏	MA ROC			
		' = '				⊢ cv				OTHERS				
				OTHERS			. ⊔	MS		ш	OTHERS			-
		Particular: Particular: Particular:								r·			1	
	Description			4 \/		Period Covered:				Period Covered:				l
Code		Period Covered: 1 Year								verea:	1		SUB-	
		No. of Years	%	No. of Units	Fees	No. of Years	%	No. of Units	Fees	No. of Years	%	No. of Units	Fees	TOTAL
	FOR LICENSES	icars		Offics		icais		Offics		icais		Offics		ł
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	Radio Station License													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	Inspection Fee													0.00
4-02-01-130	Fillling fee													0.00
4-02-01-140	Fines/Penalties/Surcharges													0.00
	AMATEUR AND ROC													
4-02-01-060	Radio Station License											_		0.00
	Radio operator's Cert													0.00
	Application Fee													
4-02-01-040	Seminar Fee Fines/Penalties/Surcharges/					_						_		0.00
	Radio Station License Radio													0.00
4-02-01-140	Operator's Cert.											_		
4-02-01-080	Permit to Purchase	-				-						-		0.00
	HER APPLICATION	-				-						_		0.00
4-02-01-020	Registration Fee Supervision & Regulation	-												0.00
4-02-01-070	Fee													0.00
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		-												0.00
4-02-01-990	Miscellaneous Income (DUPLICATE)													0.00
	Documentary Stamp Tax													0.00
4-02-01-010	(DST)	-												0.00
	Others (ADMIN FINES)													0.00 50.00
	TOTAL	None	To be a		l f	<u> </u>		05/27/2	2025	a tila a sa sa da	a a de la a			50.00
		Note:	io pe p	oaid on or	netore			03/2//2	2020	_ otnerwis	e subjec	t to reass	essment	
			For	Accaceme	ent only	,				□ Er	dorsed f	or Payme	ant	
For Assessment only Lindorsed for Payment REMARK/S														
	onal sheets, if necessary to	show det	ailed co	mputation	า									
						AND DRA	FT Paya	ble to N	ΓC-13 FA	O BUREAU	OF TREA	SURY,		
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														

APPROVED BY:

PREPARED BY:

Jerwil Carin