NATIONAL TELECOMMUNICATIONS COMMISSION Statement of Account

ASOCIACION BENEVOLA DE
CEBU INC. (CHONG HUA
HOSPITAL MANDAUE & CANCER (RC Code - Year of Issue- Mo.- Series of the RC) To: The Accountant:

Diagon ionia	Order of Dormont in force	of			CE	NIER)								
Please issue Order of Payment in favor of for payment of the fees indicated below:											Date:	Septembe	er 19 2025	<u>:</u>
		NEW		Тмор				со			MA			
	Ë	REN	⊢	DUP			H	CV		H	ROC			
	L	7 1/1014	F	1			H	MS		_ H				
				OTHERS			. Ш	IVIS			OTHERS	S		-
F			Particular: FX-ROVII-01126-25				Particular:				Particular:			
Code	Period Covered: SEP 20, 2025 to SEP 19, 2026				Period Covered:				Period Covered:				SUB-	
	Description	No. of	%	No. of	Fees	No. of	%	No. of	Fees	No. of	%	No. of	Fees	TOTAL
		Years	/0	Units	rees	Years	/0	Units	rees	Years	/*	Units	rees	1
	FOR LICENSES									ļ		_		0.00
4-02-01-010												+		0.00
4-02-01-130							_				_	\perp		0.00
4-02-01-010	Permit to Possess/Storage											\perp		0.00
4-02-01-010	Construction Permit Fee											\perp		0.00
4-02-01-060														240.00
4-02-01-100	Inspection Fee											\perp		240.00
4-02-01-080	Spectrum User's Fee (SUF)													0.00
	Fines/Penalties/Surcharges													0.00
4-02-01-140	Radio Station License Spectrum User's Fee (SUF)													
4-02-01-140	FOR PERMITS											-		
4-02-01-010	Permit Fees	1				1						+		0.00
4-02-01-100		-										$\overline{}$		0.00
4-02-01-130												_		0.00
	Fines/Penalties/Surcharges	+												0.00
	AMATEUR AND ROC					1						+		0.00
4-02-01-060	Radio Station License									İ		\top		0.00
4-02-01-060	Radio operator's Cert													0.00
	Application Fee	1												0.00
	Seminar Fee	1												0.00
	Fines/Penalties/Surcharges/	-										\top		0.00
	Radio Station License Radio													
	Operator's Cert.					-				<u> </u>	_	+-		0.00
	Permit to Purchase HER APPLICATION	+				-	_				_	+-		0.00
		+				-	_			1		+-		0.00
4-02-01-020	Registration Fee							-		1		+		0.00
4-02-01-070	Supervision & Regulation Fee													0.00
	Verification/Authentication	1												0.00
	Examination Fee	1												0.00
	Clearance/Certification Fee	-										$\overline{}$		0.00
	Modification Fee	-			t					t -		+		0.00
- 02-01-000	Miscellaneous Income	1								l		_		0.00
4-02-01-990	(DUPLICATE)							ļ		ļ		\perp		
	Documentary Stamp Tax	1	l	1	1	I	I	1		1	1			30.00

REMARK/S 1. Payment should be made in CASH, MANAGER'S/CASHIER'S CHECK. DEMAND DRAFT Payable to NTC-VII FAO BUREAU OF TREASURY

Note: To be paid on or before

For Assessment only

09/19/2025

0.00

526.00

otherwise subject to reassessment

Endorsed for Payment

4-02-01-010 (DST)

TOTAL

Others

				PREPARED BY:		APPROVED BY:
O.R.		No.			/	ltta a I
		AMOUNT:		fred to	Ju/	VT4Kent.
).R. [RINDLEY	ÉGINIO	FELIPE GUMALO, JR.
		Date:				ENGINEER V
	Г	Bv:				LINGINLLIN