## NATIONAL TELECOMMUNICATIONS COMMISSION Statement of Account

ANGELA MAE HINOGIN

To: The Accountant:									No: (RC Code - Year of Issue- Mo Series of the RC)				
								(RC Cod	e - Year of	Issue- IV	io Series	of the R	L)
Please issue Order of Payment in favor for payment of the fees indicated bel										Date:			
, ,	□NEW		Імор				со			MA			-
	✓ REN	⊢	DUP			H	CV		H	ROC			
			OTHERS			□	MS		П	OTHERS			
	Particula				Particul	ar:			Particula	r:			
Code Description	Period Co	JUL 24, 2025 to Period Covered: JUL 23, 2028				Period Covered:				Period Covered:			
	No. of	%	No. of	Fees	No. of	%	No. of	Fees	No. of	%	No. of	Fees	SUB- TOTAL
	Years	/°	Units	rees	Years	/°	Units	rees	Years	/0	Units	rees	
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 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/Surcharge													0.00
Radio Station License 4-02-01-140 Spectrum User's Fee (SUF	, l												
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/Surcharge													0.00
FOR 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													
4-02-01-040 Seminar Fee Fines/Penalties/Surcharge	es/												0.00
Radio Station License Rad	io												0.00
4-02-01-140 Operator's Cert. 4-02-01-080 Permit to Purchase											-		0.00
OTHER APPLICATION	+				<del>                                     </del>						<del>                                     </del>		0.00
4-02-01-020 Registration Fee													0.00
Supervision & Regulation													0.00
4-02-01-070 Fee													
4-02-01-040 Verification/Authentication	on										1		0.00
4-02-01-030 Examination Fee		-		_							_		0.00
4-02-01-040 Clearance/Certification Fe 4-02-01-060 Modification Fee				$\vdash$	_						_		0.00
Miscellaneous Income													0.00
4-02-01-990 (DUPLICATE)													
Documentary Stamp Tax 4-02-01-010 (DST)													30.00
Others													0.00
TO	TAL				<u> </u>		07/04/		<u> </u>				210.00
	Note:	To be p	aid on or	before			07/24/2	2025	_otherwis	e subjec	t to reass	essment	
	For Assessment only Endorsed for Payment												
REMARK/S		LI ror	MOSESSME	ent Only	,				Er	iuorse0 1	oi Payme	:IIL	
Payment should be made in CASH,	MANAGER'S	/CASHIF	R's CHEC	K. DEM	AND DRA	FT Pava	ble to N	C-13 FA	O BUREAU	OF			
TREASURY						. /-							

			PREPARED BY:	APPROVED BY:
O.R		No.	ed.	ltta c 1
		AMOUNT:	fred the contract of the contr	VTX Cust.
	O.R.		RINDLEY REGINIO	FELIPE GUMALO
		Date:		ENGINEER V
ı		By:		LINGINEER