NATIONAL TELECOMMUNICATIONS COMMISSION Statement of Account

JASON LEDESMA														
To: The Accountant:			JASON LEDESMA						No:					
10. 1110 / 100								(RC Cod	e - Year of		Ao Series	of the R	C)	
Please issue Order of Payment in favor of for payment of the fees indicated below:						Date:					_			
		NEW		МОР				со			MA			
		REN	⊢	DUP			H	cv		H	ROC			
			F	OTHERS			П	MS		H	OTHER	s		
			_	101112113				1113			0111211			-
Particular:				Particular:			Particular:							
	JUL 22, 2025 to Period Covered: JUL 21, 2026				Period Covered:			Period Covered:				SUB-		
Code Description		002 21, 2020												
		No. of Years	%	No. of Units	Fees	No. of Years	%	No. of Units	Fees	Years	%	No. of Units	Fees	TOTAL
	FOR LICENSES	rears		- Cinco		10015		Oines		icuis		Units		1
4-02-01-010	Permit to Purchase											1		0.00
4-02-01-130	Filing Fee											1		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													0.00
4-02-01-140	Radio Station License Spectrum User's Fee (SUF)													
4-02-01-140	FOR PERMITS				 							1		┢
4-02-01-010					<u> </u>	 						1		0.00
4-02-01-010	Permit Fees Inspection Fee					_						1		0.00
														0.00
	Fillling fee Fines/Penalties/Surcharges													0.00
	AMATEUR AND ROC													
4-02-01-060	Radio Station License											1		0.00
	Radio operator's Cert													0.00
	Application Fee													
	Seminar Fee													
	Fines/Penalties/Surcharges/													0.00
4 02 04 440	Radio Station License Radio													
4-02-01-140 4-02-01-080	Operator's Cert. Permit to Purchase				_							1		0.00
	HER APPLICATION				_	 						1		0.00
4-02-01-020	Registration Fee													0.00
4-02-01-020	Supervision & Regulation													0.00
4-02-01-070	Fee													
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)					1								0.00
- 52-01-350	Documentary Stamp Tax			†								1		0.00
4-02-01-010	(DST)											_		
	Others				1			<u> </u>		\vdash		_		0.00
	TOTAL													50.00
		Note:	To be p	paid on or	before			07/22/2	2025	_otherwise	e subje	t to reass	essment	

For Assessment only	Endo
REMARK/S	
1. Payment should be made in CASH, MANAGER'S/CASHIER's CHECK. DEMAND DRAFT Payable to NTC-13 FAC	BUREAU OF
TREASURY	

			PREPARED BY:	APPROVED BY:
O.R.		No.	ch.	ltta o I
		AMOUNT:	falle -	V#AGUAT.
	O.R.		RINDLEY REGINIO	FELIPE GUMALO
		Date:		ENGINEER V
		Bv:		LINGINLLIN

Endorsed for Payment