| Ī  | NATIONAL TELECOMMUNICATIONS COMMISSION Regional Office No. XII          |                     |                           | Serial No. :<br>Date : | <br>May 20, 2025 |
|--|---|---------------------|---------------------------|------------------------|------------------|
|  |   | <b>g</b>            |                           |                        |                  |
| General Fund                                     |   |                     |                           |                        |                  |
|  |   |                     | ORDER OF PAYME            | NT                     |                  |
| The Collecting Office                            | r   |                     |                           |                        |                  |
|  |   |                     |                           |                        |                  |
| Planca ico                                       | ua Official E   | toggint in favor of | NTC REGION 12             |                        |                  |
| Please issue <b>Official Receipt</b> in favor of |   |                     | (Name of Payor)           |                        |                  |
| Gps City Of Ko                                   | ronadal (   | 'canital)           |                           | (Ivame of 1 ayor)      |                  |
| Opo Oity Of No                                   | Toriadai  | Japital             | (Address/Office of Payor) |                        |                  |
| in the amount of                                 | ONE THOUSAND AND FOUR HUNDRED AND SEVENTY PESOS AND ZERO CENTS PHP 1470 |                     |                           |                        |                  |
| for the payment of                               |   |                     |                           |                        |                  |
|  |   |                     |                           |                        |                  |
|  |   |                     | (Purpose)                 |                        |                  |
| per Statement of Account No.                     |   |                     |                           | dated                  |                  |
| DI 1 2-4 II                                      |   | D 14 ./             |                           |                        |                  |
| Please deposit the coll                          | ections unde  | r Bank Account/s:   | Name of Bank              |                        | Amount           |
| No.  |   |                     | Name of Bank              | PHP                    | Amount           |
|  |   |                     | -                         | PHP                    |                  |
| TOTAL  |   |                     |                           | PHP                    |                  |
|  |   |                     |                           |                        |                  |
|  |   |                     |                           |                        |                  |
|  |   |                     | TestJedÿ- Accounta        | ant                    |                  |
|  |   |                     | -                         |                        |                  |
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