NATIONAL TELECOMMUNICATIONS COMMISSION Statement of Account

To: The Accountant: No: (RC Code - Year of Issue- Mo Series of the RC)											C)			
	Order of Payment in favor o								,		Date:			,
ioi payment	_	NEW REN		MOD DUP OTHERS				co cv ms			MA ROC	s		
		Particular: TEMP-ROX-1263-25			Particular:				Particula	Particular:				
Code	Description	Period C	Period Covered: 1 Year			Period Covered:				Period Covered:				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													
4-02-01-010	Permit to Purchase													0.00
4-02-01-130	Filing Fee													0.00
4-02-01-010														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) Fines/Penalties/Surcharges Radio Station License													0.00
4-02-01-140														
	FOR PERMITS													
4-02-01-010	Permit Fees													0.00
4-02-01-100	Inspection Fee													0.00
	Fillling fee													0.00
														0.00
	AMATEUR AND ROC													
4-02-01-060	Radio Station License													0.00
	Radio operator's Cert													0.00
4-02-01-130	Application Fee													
4-02-01-040	Seminar Fee													
	Fines/Penalties/Surcharges/ Radio Station License Radio													0.00
	Operator's Cert. Permit to Purchase											1		0.00
	THER APPLICATION					 		1		1		+		0.00
4-02-01-020	Registration Fee					 		1		1		1		0.00
4-02-01-070	Supervision & Regulation													0.00
4-02-01-040	Fee Verification/Authentication									1				0.00
4-02-01-030	Examination Fee													60.00
4-02-01-040	Clearance/Certification Fee													0.00
4-02-01-060	Modification Fee													0.00
4-02-01-990	Miscellaneous Income (DUPLICATE)													0.00
	Documentary Stamp Tax													0.00
4-02-01-010	(DST)	-				-				-				0.00
	Others TOTAL											+		60.00
	IOIAL	Note:	To bo	paid on or	hoforo	I		06/09/2	2025	othorwic	o cubios	t to reacc	occmont	00.00
REMARK/S	For Assessment only Endorsed for Payment													
-	ional sheets, if necessary to	show do	n halic	mnutatio	2									
						AND DDA	ET Dave	hla to N	TC-13 FA	O BLIREAL	OF TRE	ASLIRV		
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

PREPARED BY:	APPROVED BY:
JOEL SILADAN	