► DLN:	
Republika ng Pilipinas Kagawaran ng Pananalapi Cert	rificate of Compensation
	ayment/Tax Withheld 2316
For Compensation Payment With or Without Tax Withheld	July 2008 (ENCS)
Fill in all applicable spaces. Mark all appropriate boxes with an	2 Fartha Daviad
(YYYY) • 2016	Port IV P
Part I Employee Information 3 Taxpayer 475 222 225 0	Part IV-B Details of Compensation Income and Tax Withheld from Present Employer Amount
identification No.	A. NON-TAXABLE/EXEMPT COMPENSATION INCOME
	081 Statutory Minimum Wage
6 Registered Address 6A Zip	o Code Minimum Wage Earner (MWE)
SITIO CANIPAAN, BARANGAY BANQUEROHAN, CADIZ CITY, NE	EGROS OCCIDENTAL 33 Holiday Pay (MWE) 33
6B Local Home Address 6C Zip	O Code 34 Overtime Pay (MWE) 34
SD Foreign Address 6E Zin	o Code
VE 21	35 Night Shift Differential (MWE)
7 Date of Birth (MM/DD/YYYY) 8 Telephone Number	36 Hazard Pay (MWE) 36
07 24 1994	37 13th Month Pay 37 9,840.64
Exemption Status Single Married	and Other Benefits 9,040.04
PA Is the wife claiming the additional exemption for qualified dependent chi	38 De Minimis Benefits 38 22,664.38
10 Name of Qualified Dependent Children 11 Date of Birth (MM/DD	0/YYYY)
	39 SSS, GSIS, PHIC & Pag-ibig Contributions, & Union Dues 7,221.10
	(Employee share only)
	40 Salaries & Other Forms of 40 0.00
12 Statutory Minimum Wage rate per day 12	Compensation
13 Statutory Minimum Wage rate per month 13	41 Total Non-Taxable/Exempt 41 Compensation Income 39,726.12
Minimum Wage Earner whose compensation is exempt from withholding tax and not subject to income tax	B. TAXABLE COMPENSATION INCOME
Part II Employer Information (Present)	REGULAR
Identification No.	42 Basic Salary 42 110,866.56
I6 Employer's Name TATE PUBLISHING AND ENTERPRISES (PHILIPPING)	NES), 43 Representation 43
	Cip Code 44 Transportation 44
	Tip Code 6000 44 Transportation 44
SALINAS DRIVE LAHUG CEBU CITY Main Employer Secondary Employer Part III Employer Information (Previous) 18 Taxpayer	44 Transportation
SALINAS DRIVE LAHUG CEBU CITY Main Employer Secondary Employer Part III Employer Information (Previous)	44 Transportation 45 Cost of Living Allowance 46 Fixed Housing Allowance 47 Others (Specify)
SALINAS DRIVE LAHUG CEBU CITY Main Employer Part III Employer Information (Previous) 18 Taxpayer Identification No. 19 Employer's Name	44 Transportation 45 Cost of Living Allowance 46 Fixed Housing Allowance 47 Others (Specify) 47A 47A 47A 47A 47A 47A 47A 47A 47A
SALINAS DRIVE LAHUG CEBU CITY Main Employer Part III Employer Information (Previous) 18 Taxpayer Identification No. 19 Employer's Name	44 Transportation 45 Cost of Living Allowance 46 Fixed Housing Allowance 47 Others (Specify) 47A 47A 1,533.71
SALINAS DRIVE LAHUG CEBU CITY Main Employer Part III Employer Information (Previous) 18 Taxpayer Identification No. 19 Employer's Name	44 Transportation 45 Cost of Living Allowance 46 Fixed Housing Allowance 47 Others (Specify) 47A 47A 47A 47A 47A 47A 47A 47A 47A
SALINAS DRIVE LAHUG CEBU CITY Main Employer Part III Employer Information (Previous) 18 Taxpayer Identification No. 19 Employer's Name 20 Registered Address Part IV-A Summary	44 Transportation 44 45 Cost of Living Allowance 45 46 Fixed Housing Allowance 46 47 Others (Specify) 47A 1,533.71 Gip Code 47B SUPPLEMENTARY 48 Commission 48
SALINAS DRIVE LAHUG CEBU CITY Main Employer Secondary Employer	44 Transportation 45 Cost of Living Allowance 46 Fixed Housing Allowance 47 Others (Specify) 47A 47A 1,533.71 Tip Code 48 Commission 48 Commission 49 40 41 41 42 45 45 46 47 47 47 47 47 47 47 47 47 47 47 47 47
SALINAS DRIVE LAHUG CEBU CITY Main Employer Secondary Employer	44 Transportation 45 45 Cost of Living Allowance 45 46 Fixed Housing Allowance 46 47 Others (Specify) 47A 1,533.71 Tip Code 47B SUPPLEMENTARY 48 Commission 48 3,126.39 49 Profit Sharing 49 7,726.12 50 Fees Including Director's 50
SALINAS DRIVE LAHUG CEBU CITY Main Employer Secondary Employer	44 Transportation 44 45 Cost of Living Allowance 45 46 Fixed Housing Allowance 46 47 Others (Specify) 47A 1,533.71 ATA 1,533
SALINAS DRIVE LAHUG CEBU CITY Main Employer Secondary Employer	44 Transportation 45 Cost of Living Allowance 46 46 Fixed Housing Allowance 46 47 Others (Specify) 47A 47B 50PPLEMENTARY 48 Commission 48 50,126.39 6,726.12 7,726.12 7,400.27 7,26.12 7,400.27 8,400.27 8,400.27 1,400.27 1,400.27 1,400.27 1,400.27 1,400.27 2,400.27 3,400.27 3,400.27 3,400.27 45 Cost of Living Allowance 46 47 47A 48 47A 48 49 49 49 49 49 49 49 49 49 49 49 49 49
SALINAS DRIVE LAHUG CEBU CITY Main Employer Secondary Employer	44 Transportation 45 Cost of Living Allowance 46 46 Fixed Housing Allowance 46 47 Others (Specify) 47A 47B 50PPLEMENTARY 48 Commission 48 51,126.39 6,726.12 7,726.12 7,400.27 7,1000 7,
SALINAS DRIVE LAHUG CEBU CITY Main Employer Secondary Employer	45 Cost of Living Allowance 45 46 Fixed Housing Allowance 46 47 Others (Specify) 47A
SALINAS DRIVE LAHUG CEBU CITY Main Employer Secondary Employer	44 Transportation 45 Cost of Living Allowance 46 46 Fixed Housing Allowance 46 47 Others (Specify) 47A 47B 3UPPLEMENTARY 48 Commission 48 5UPPLEMENTARY 48 Commission 49 6,400.27 6,400.27 50 Fees Including Director's Fees 51 Taxable 13th Month Pay and Other Benefits 6,000.00 6,400.27 52 Hazard Pav 53 Overtime Pay 53
SALINAS DRIVE LAHUG CEBU CITY Main Employer Secondary Employer	45 Cost of Living Allowance 45 46 Fixed Housing Allowance 46 47 Others (Specify) 47A
SALINAS DRIVE LAHUG CEBU CITY Main Employer Secondary Employer	45 Cost of Living Allowance 45 46 Fixed Housing Allowance 46 47 Others (Specify) 47A
SALINAS DRIVE LAHUG CEBU CITY Main Employer Secondary Employer	44 Transportation 45 Cost of Living Allowance 46 46 Fixed Housing Allowance 46 47 Others (Specify) 47A 47B SUPPLEMENTARY 48 Commission 48 49 Profit Sharing 40 Profit Sharing
Main Employer Secondary Employer Part III Employer Information (Previous) 18 Taxpayer Identification No. 19 Employer's Name 20 Registered Address 20 Registered Address 21 Gross Compensation Income from Present Employer (Item 41 plus Item 55) 22 Less: Total Non-Taxable/ Exempt (Item 41) 23 Taxable Compensation Income from Present Employer (Item 55) 24 Add: Taxable Compensation Income from Previous Employer 25 Gross Taxable Compensation Income from Previous Employer 26 Less: Total Exemptions 27 Less: Premium Paid on Health and/or Hospital Insurance (If applicable) 28 Net Taxable Compensation Income 29 Tax Due 20 Tax Due 21 Day 10 Da	44 Transportation 45 Cost of Living Allowance 46 Fixed Housing Allowance 46 Fixed Housing Allowance 47 Others (Specify) 47A
SALINAS DRIVE LAHUG CEBU CITY Main Employer Secondary Employer	44 Transportation 44 Transportation 45 Cost of Living Allowance 45 46 Fixed Housing Allowance 46 47 Others (Specify) 47A 47B 47B 47B 3UPPLEMENTARY 48 Commission 48 Commission 49 Profit Sharing 49 Profit Sharing 49 Profit Sharing 50 Fees Including Director's 50 Fees Address 50 Fees Including Director's 50 Fees
SALINAS DRIVE LAHUG CEBU CITY Main Employer Secondary Employer	44 Transportation 44 Transportation 45 Cost of Living Allowance 45 46 Fixed Housing Allowance 46 47 Others (Specify) 47A 47B 47B 47B 3UPPLEMENTARY 48 Commission 48 Commission 49 Profit Sharing 49 Profit Sharing 49 Profit Sharing 50 Fees Including Director's 50 Fees Address 50 Fees Including Director's 50 Fees
Main Employer Secondary Employer Part III Employer Information (Previous) 18 Taxpayer Identification No. 19 Employer's Name 20 Registered Address 20 Registered Address 20 Registered Address 21 152 22 Less: Total Non-Taxable/ Exempt (Item 41) plus Item 55) 23 Taxable Compensation Income from Present Employer (Item 55) 24 Add: Taxable Compensation Income from Previous Employer 25 Gross Taxable Compensation Income 26 Less: Total Exemptions 27 Less: Premium Paid on Health and/or Hospital Insurance (If applicable) 28 Net Taxable Compensation Income 29 Tax Due 29 Tax Due 29 Tax Due 30 Amount of Taxes Withheld 30 A Present Employer 31 Total Amount of Taxes Withheld 30 A Present Employer 31 Total Amount of Taxes Withheld 31 Total Amount of Taxes Withheld 30 A Present Employer 31 Total Amount of Taxes Withheld 31 Total Amount of Taxes Withheld 32 Diana Rose T. Bartulin 24 Present Employer/Authorized Agent Signature Over Printed Name CONFORME: 57 Jovit Napoles	45 Cost of Living Allowance 46 Fixed Housing Allowance 46 Fixed Housing Allowance 47 Others (Specify) 47A
SALINAS DRIVE LAHUG CEBU CITY Main Employer Secondary Employer	45 Cost of Living Allowance 45 46 Fixed Housing Allowance 46 47 Others (Specify) 47A 47B 47B 47B 47B 5UPPLEMENTARY 48 Commission 48 49 Profit Sharing 40 Pro
SALINAS DRIVE LAHUG CEBU CITY Main Employer Secondary Employer	44 Transportation 45 45 Cost of Living Allowance 45 46 Fixed Housing Allowance 46 47 Others (Specify) 47A 1,533.71 47B 3UPPLEMENTARY 48 Commission 48 48 Commission 48 49 Profit Sharing 49 49.726.12 400.27 50 Fees Including Director's 50 51 Taxable 13th Month Pay and Other Benefits 51 52 Hazard Pay 52 53 Overtime Pay 53 54 Others (Specify) 54A 54B 54B 55B Total Taxable Compensation 55 51 Total
Main Employer Secondary Employer Part III Employer Information (Previous) 18 Taxpayer Identification No. 19 Employer's Name 20 Registered Address 20 A Z 21 Total Non-Taxable/ Exempt (Item 41) plus Item 55) 22 Less: Total Non-Taxable/ Exempt (Item 41) 23 Taxable Compensation Income from Present Employer (Item 55) 24 Add: Taxable Compensation Income from Present Employer (Item 55) 25 Less: Total Exemptions 26 Gross Taxable Compensation Income Exes: Total Exemptions 27 Less: Premium Paid on Health and/or Hospital Insurance (If applicable) 28 Net Taxable Compensation Income 29 Tax Due 29 Tax Due 30 Amount of Taxes Withheld 30 A Present Employer 31 Total Amount of Taxes Withheld 31 As adjusted We declare, under the penalties of perjury, that this certificate has been mare pursuant to the provisions of the National Internal Revenue Code, as amended, 56 Diana Rose T. Bartulin Present Employer/Authorized Agent Signature Over Printed Name CONFORME: Jovit Napoles CTC No. Employee Signature Over Printed Name of Employee Place of Issue	44 Transportation 45 Cost of Living Allowance 45 46 Fixed Housing Allowance 47 Others (Specify) 47A 47A 47A 47A 47B 5UPPLEMENTARY 48 Commission 48 49 Profit Sharing 49 49 Profit Sharing 50 Fees Including Director's Fees 51 Taxable 13th Month Pay and Other Benefits 50 Hazard Pay 51 Taxable 13th Month Pay 51 50 Outline Pay 51 Town of Compensation 52 Hazard Pay 53 Overtime Pay 54 Others (Specify) 554A 554B 554B 555 Total Taxable Compensation 55 Jana Date Signed 55 Total Taxable Compensation 55 Jana Date Signed 55 Date Signed 56 Date of Issue 57 Date Signed 58 Date of Issue 59 Date of Issue 59 Date of Issue 50 Date Signed 50 Date of Issue 50 Date Signed 51 Date of Issue 51 Date Signed 52 Date of Issue 54 Date of Issue 55 Date of Issue 56 Date of Issue 57 Date Signed 58 Date of Issue 59 Date of Issue 50 Date Signed 51 Date of Issue 51 Date Signed 52 Date of Issue 53 Date of Issue 54 Date of Issue 55 Date of Issue 56 Date of Issue 57 Date Signed 58 Date of Issue 59 Date of Issue 50 Date Signed 50 Date of Issue 50 Date Signed 51 Date of Issue 51 Date of Issue 52 Date of Issue 53 Date of Issue 54 Date of Issue 55 Date of Issue 56 Date of Issue 57 Date Signed 58 Date of Issue 59 Date of Issue 50 Date of Issue 51 Date of Issue 52 Date of Issue 53 Date of Issue 54 Date of Issue 55 Date of Issue 56 Date of Issue 57 Date of Issue 58 Date of Issue 59 Date of Issue 50 Date of Issue 51 Date of Issue 52 Date of Issue 53 Date of Issue 54 Date of Issue 55 Date of Issue 56 Date of Issue 57 Date of Issue 58 Date of Issue 59 Date of Issue 50 Date of Issue 51 Date of Issue 51 Date of Issue 52 Date of Issue 54 Date of Issue 54 Date of Issue 55 Date of Issue 56 Date of Issue 57 Date of Issue 58 Date of Issue 59 Date of Issue 50 Date of Issue 50 Date of Issue
SALINAS DRIVE LAHUG CEBU CITY Main Employer Secondary Employer	44 Transportation 45 Cost of Living Allowance 45 46 Fixed Housing Allowance 46 47 Others (Specify) 47A 47A 47A 47A 47B 3UPPLEMENTARY 48 Commission 48 49 Profit Sharing 40 Profit Sharing 47 Profit Sharing 48 Profit Sharing 48 Profit Sharing 48 Profit Sharing 49 Profit Sharing 49 Profit Sharing 40 Pro