


<p>DLN:</p> <div><div><div>Republika ng Pilipinas Kagawaran ng Pananalapi Kawanihan ng Rentas Internas</div></div><div>Certificate of Compensation Payment/Tax Withheld</div><div>BIR Form No. 2316 July 2008 (ENCS)</div></div>	
For Compensation Payment With or Without Tax Withheld	
Fill in all applicable spaces. Mark all appropriate boxes with an "X"	
1 For the Year (YYYY) 2016	2 For the Period From (MM/DD) 01 04 To (MM/DD) 12 31
Part I Employee Information	
3 Taxpayer Identification No. 324 933 441 0000	
4 Employee's Name (Last Name, First Name, Middle Name) 5 RDO Code DAANG, ESTHER ABIGAIL JAVIER 081	
6 Registered Address 6A Zip Code UNIVERSITY OF SAN CARLOS DORMITORIES, NASIPIT, TALAMBAN, CEBU CITY, PHILIPPINES	
6B Local Home Address 6C Zip Code	
6D Foreign Address 6E Zip Code	
7 Date of Birth (MM/DD/YYYY) 12 27 1993 8 Telephone Number	
9 Exemption Status 9A Is the wife claiming the additional exemption for qualified dependent children? Single Married Yes No	
10 Name of Qualified Dependent Children 11 Date of Birth (MM/DD/YYYY)	
12 Statutory Minimum Wage rate per day 12 13 Statutory Minimum Wage rate per month 13 14 Minimum Wage Earner whose compensation is exempt from withholding tax and not subject to income tax	
Part II Employer Information (Present)	
15 Taxpayer Identification No. 423 687 498 0000	
16 Employer's Name TATE PUBLISHING AND ENTERPRISES (PHILIPPINES),	
17 Registered Address 17A Zip Code SALINAS DRIVE LAHUG CEBU CITY 6000	
Main Employer Secondary Employer	
Part III Employer Information (Previous)	
18 Taxpayer Identification No. 19 Employer's Name	
20 Registered Address 20A Zip Code	
Part IV-A Summary	
21 Gross Compensation Income from Present Employer (Item 41 plus Item 55) 185,913.46	
22 Less: Total Non-Taxable/Exempt (Item 41) 47,331.35	
23 Taxable Compensation Income from Present Employer (Item 55) 138,582.11	
24 Add: Taxable Compensation Income from Previous Employer 0.00	
25 Gross Taxable Compensation Income 138,582.11	
26 Less: Total Exemptions 50,000.00	
27 Less: Premium Paid on Health and/or Hospital Insurance (If applicable) 0.00	
28 Net Taxable Compensation Income 88,582.11	
29 Tax Due 12,216.42	
30 Amount of Taxes Withheld 30A Present Employer 14,273.81 30B Previous Employer 0.00	
31 Total Amount of Taxes Withheld As adjusted 14,273.81	
We declare, under the penalties of perjury, that this certificate has been made in good faith, verified by us, and to the best of our knowledge and belief, is true and correct pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under authority thereof.	
56 Diana Rose T. Bartulin Present Employer/ Authorized Agent Signature Over Printed Name Date Signed	
CONFORME: 57 Esther Abigail Daang Employee Signature Over Printed Name Date Signed	
CTC No. of Employee Place of Issue Date of Issue Amount Paid	
To be accomplished under substituted filing	
I declare, under the penalties of perjury, that the information herein stated are reported under BIR Form No. 1604CF which has been filed with the Bureau of Internal Revenue.	
58 Diana Rose T. Bartulin Present Employer/ Authorized Agent Signature Over Printed Name (Head of Accounting/ Human Resource or Authorized Representative)	
I declare, under the penalties of perjury that I am qualified under substituted filing of Income Tax Returns (BIR Form No. 1700), since I received purely compensation income from only one employer in the Phils. for the calendar year; that taxes have been correctly withheld by my employer (tax due equals tax withheld); that the BIR Form No. 1604CF filed by my employer to the BIR shall constitute as my income tax return; and that BIR Form No. 2316 shall serve the same purpose as if BIR Form No. 1700 had been filed pursuant to the provisions of RR No. 3-2002, as amended.	
59 Esther Abigail Daang Employee Signature Over Printed Name	