

Statement For:	Please Pay By:	Amount Due:
FEBRUARY 1-29,2024	March 10, 2024	P 53,716.00

Questions? Contact

Ma. Luz Alcala Phone: 501-3000/09190699481 E-mail: leasingacctg@alturasbohol.com

SOA No. : SOA0000811

Date of Transaction: February 29, 2024

Billing Period : FEBRUARY 1-29,2024

Trade Name : St. Jude Medical Clinic
Corp Name : ST. JUDE MEDICAL CLINIC

LESSEE'S INFORMATION

TIN : 226-541-085-004

Address : MV Patalinghug Avenue, Pajo, Lapu-Lapu City, 6015

 $Please\ make\ all\ checks\ payable\ to\ ISLAND\ CITY\ MALL;\ BANK: BPI\ ACCOUNT\ No.\ 9471-0019-85$

Statement of Account

DESCRIPTION			AMOUNT		
VIOUS					
January 2024 Total Previous Amount Payable			P 26,872.00		
			P 26,872.00		P 26,872.00
RENT(February 2024)					
Rental					
Basic Rent			P 20,000.00		
Rental Incrementation (20,000.00 x 10.00%)			2,000.00		
Vat Output			2,640.00		
Creditable Witho	lding Tax		-1,100.00		
Sub Total			P 23,540.00	P 23,540.00	
Add:Other Charges					
Aircon			1,500.00		
Common Usage Charges			1,500.00		
Electricity					
Present	Previous	Consumed	4.74.00		
214.00	200.00	14.00	154.00		
Pest Control			150.00		
Sub Total			P 3,304.00	P 3,304.00	
Total Current Amount Payable			_	P 26,844.00	P 26,844.00
Total Amount Payable				_	P 53,716.00
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Certified:					

Certified:

Karen Jame Longjas

Corporate Leasing Manager

Note: Presentation of this statement is sufficient notice that the account is due. Interest of 3% will be charged for all past due accounts.

Acknowledgment Certificate No. : AC_123_122023_000135

Date Issued : December 12, 2023

Series Range : SOA0000001 - SOA9999999

Thank you for your prompt payment!

THIS DOCUMENT IS NOT VALID FOR CLAIM OF INPUT TAX