

Statement For:	Please Pay By:	Amount Due:
MAY 1-31,2024	June 10, 2024	P 134,061.00

LESSEE'S INFORMATION

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

Trade Name: St. Jude Medical ClinicSOA No.: SOA0002297Corp Name: ST. JUDE MEDICAL CLINICDate of Transaction: May 31, 2024TIN: 226-541-085-004Billing Period: MAY 1-31,2024

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		
EVIOUS						
January 2024			P 26,872.00			
February 2024			P 26,844.00			
March 2024			P 26,701.00			
April 2024			P 26,789.00			
Total Previous Amount Payable		P 107,206.00		P 107,206.00		
URRENT(May 2024)						
Rental						
Basic Rent			P 22,000.00			
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				
239.00	224.00	15.00	165.00			
Pest Control			150.00			
Sub Total			P 3,315.00	P 3,315.00		
Total Current Amount Payable			_	P 26,855.00	P 26,855.00	
Total Amount Payable				_	P 134,061.00	

Certified:

Karen Jame Longjas

Corporate Leasing Manager

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