

Statement For:	Please Pay By:	Amount Due:
JANUARY 1-31,2024	February 15, 2024	P 26,872.00

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

SOA No. : SOA0000505 **Trade Name** : St. Jude Medical Clinic

: ST. JUDE MEDICAL CLINIC Date of Transaction: January 31, 2024 **Corp Name Billing Period** TIN : 226-541-085-004 : JANUARY 1-31,2024

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

LESSEE'S INFORMATION

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

Statement of Account

DESCRIPTION	AMOUNT		
RENT(January 2024)			
Rental			
Basic Rent	P 20,000.00		
Rental Incrementation (20,000.00 x 10.00%)	2,000.00 2,640.00		
Vat Output			
Creditable Witholding 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	102.00		
200.00 186.00 14.00	182.00		
Pest Control	150.00		
Sub Total	P 3,332.00	P 3,332.00	
Total Current Amount Payable	P 26,872.00	P 26,872.00	
Total Amount Payable			P 26,872.00
Certified: Karen Jan	ne Longjas		

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 : SOA0000001 - SOA9999999

Series Range

Thank you for your prompt payment!

THIS DOCUMENT IS NOT VALID FOR CLAIM OF INPUT TAX