

Certificate of Income Payment Not Subject to Withholding Tax

BIR Form No. 2304
July 1999 (ENCS)

(Excluding Compensation Income)

1 For the Year 1 (YYYY)			
PartI Payee Information	Part III Details of Income Payment		
2 Taxpayer 2 dentification No. ►	Nature of Income Payment	ATC	Amount of Income Payment
3 Payee's Name (For Non-Individuals)	A. Individual Payees 10 Interest	II 110 ¹	10
3	11 Rent - Personal Property	II 051 1	11
4 Payee's Name (For Individuals)	regardless of amount		•
Last 4A Name ►	12 Premium and Annuity	11 0 6 0	•
First 4B	13 Pension	11 070	13
Name Middle 4C	14 Prizes Amounting to: 10,000 or Less	II 120 .	14
Name •	15 Transportation Contractors	11 090 .	
5 Registered Address 5A	for the Carriage of Goods and Merchandise Below P2,000	11090	-
54	16 Others (Specify)	11 080	
5A Zip Code Foreign Address 5B	16A	1	6A ●
5C	16B	1	6В
	B. Corporate Payees		
Part II Payor Information	17 Interest	IC170 1	•
6 Taxpayer 6	18 Rent - Personal Property	IC130	18
Identification No. ►	regardless of amount 19 Premium and Annuity	IC 140	19
7			•
8 Payor's Name (For Individuals)	20 Prizes regardless of amount21 Professional Fees Paid to Gen.	IC120 2	20
Last 8A	Professional Partnerships	IC021 2	21
Name First 8B	(Except to partnership of medical practitioners)		
Name •	22 Transportation Contractors	IC160 2	22
Middle 8C Name ►	for the Carriage of Goods and Merchandise Below P2,000		•
9 Registered Address	23 Others (Specify)	IC150	
9A	23A	2	3A •
9A	23B	2	3В
Zip Code			
98 98	24 Total	2	
I declare, under the penalties of perjury, that this certificate has been made in good faith, verified by me, and to the best of my 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.			
25	26		
Payor/Authorized Agent Signature over Printed Name	T	itle/Position c	of Signatory