

2307

**Certificate of Creditable Tax
Withheld at Source**

2307 01/18ENCS

BR Form No.
January 2018 (ENCS)

Fill in all applicable spaces. Mark all appropriate boxes with an "X".

1 For the Period

From **07** **01** **2021** **DD/YY**

To **09** **30** **2021** **MM/DD/YY**

2 Taxpayer Identification Number (TIN)

000-860-750-000

Part I – Payee Information

3 Payee's Name (Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual)

COLIBAO, Allan R.

4 Registered Address

General Santos Ave, Bicutan, Taguig City

5 Foreign Address, if applicable

6 Taxpayer Identification Number (TIN)

000-860-750-000

4A ZIP Code

7 Payor's Name (Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual)

National Research Council of the Philippines

8 Registered Address

8A ZIP Code

Part II – Payor Information

Income Payments Subject to Expanded Withholding Tax

ATC 1st Month of the Quarter 2nd Month of the Quarter 3rd Month of the Quarter Total Tax Withheld for the Quarter

Income payments made by the government and government-owned and controlled corporations (COCCs) to its local residents, suppliers or services other than those covered by

Persons Exempt from VAT under Sec. 109(B) (creditable):

ATC	1st Month of the Quarter	2nd Month of the Quarter	3rd Month of the Quarter	Total	Tax Withheld for the Quarter
WI 157	40,504.00	52,417.00	92,921.00	1,858.42	1,858.42

Total Money Payments Subject to Withholding of Business Tax (Government & Private)

ATC	1st Month of the Quarter	2nd Month of the Quarter	3rd Month of the Quarter	Total	Tax Withheld for the Quarter
WB080	121,513	104,835	226,348	2,203.48	2,203.48

Business Tax (Government & Private)

ATC	1st Month of the Quarter	2nd Month of the Quarter	3rd Month of the Quarter	Total	Tax Withheld for the Quarter
WB080	121,513	104,835	226,348	2,203.48	2,203.48

Total

ATC	1st Month of the Quarter	2nd Month of the Quarter	3rd Month of the Quarter	Total	Tax Withheld for the Quarter
				2,263.48	2,263.48

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. Further, we give our consent to the processing of our information as contemplated under the *Data Privacy Act of 2012 (RA No. 10173) for legitimate and lawful purposes.

DANIEL A. SALILLAS

Accountant III

Signature over Printed Name of Payor/Payor's Authorized Representative/Tax Agent
(Indicate Title/Designation and TIN)

Tax Agent Accreditation No./

Attorney's Roll No. (if applicable)

CONFORME:

Signature over Printed Name of Payee/Payee's Authorized Representative/Tax Agent
(Indicate Title/Designation and TIN)

Tax Agent Accreditation No./

Attorney's Roll No. (if applicable)

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1 For the Period From **07** | **01** | **20** | **21** | **DD/YY**) To **09** | **30** | **2021** | **(MM/DD/YY)**2 Taxpayer Identification Number (TIN) **4 10 11 3 1 14 8 0 4 - 0 0 10 1** Part I – Payee Information3 Payee's Name (Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual)
SUSA, Brian Bascon

4 Registered Address Blk 6 Lot 22 I-7 Hiltop drive, Holiday Hills Subdv. Father Masi St. Bigy San Antonio, San Pedro Laguna

5 Foreign Address, if applicable

6 Taxpayer Identification Number (TIN) **000 1 - 860 1 - 750 1 - 000 1 - 1** Part II – Payor Information7 Payor's Name (Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual)
National Research Council of the Philippines8 Registered Address **General Santos Ave, Bicutan, Taguig City** 8A ZIP Code **_____**

Part III – Details of Monthly Income Payments and Taxes Withheld

Income Payments Subject to Expanded Withholding Tax	ATC	AMOUNT OF INCOME PAYMENTS			Tax Withheld for the Quarter
		1st Month of the Quarter	2nd Month of the Quarter	3rd Month of the Quarter	
income payments made by the government and government-owned and controlled corporations (GOCCs) to its local resident suppliers of services other than those covered by	WI 157	25,323.50	25,307.50	25,307.50	75,938.50
					1,518.77

Total **1,518.77**

Money Payments Subject to Withholding of Business Tax (Government & Private)

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. Further, we give our consent to the processing of our information as contemplated under the "Data Privacy Act of 2012" (RA No. 10173), for legitimate and lawful purposes.

DANILO A. SAILLUS
Accountant III

Signature over Printed Name of Payor/Payer/Authorized Representative/Tax Agent
(Indicate Title/Designation and TIN)

Tax Agent Accreditation No./
Attorney's Roll No. (if applicable) _____ Date of Issue **(MM/DD/YYYY)** Date of Expiry **(MM/DD/YYYY)**

CONFORME:

Signature over Printed Name of Payee/Payer's Authorized Representative/Tax Agent
(Indicate Title/Designation and TIN)Tax Agent Accreditation No./
Attorney's Roll No. (if applicable) _____ Date of Issue **(MM/DD/YYYY)** Date of Expiry **(MM/DD/YYYY)**



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1 For the Period From **07 | 01 | 2012 | 1** **(DDMMYY)** To **09 | 30 | 2021 | 1** **(MMDDYYYY)**

2 Taxpayer Identification Number (TIN) **479 | 770 | - 878 | - 00 | 0 | 0 | 0 | 1** Part I – Payee Information

3 Payee's Name (Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual)

REYES, Rondolf G.

4 Registered Address _____

5 Foreign Address, if applicable _____

6 Taxpayer Identification Number (TIN) **000 | 000 | - 860 | - 750 | - 000 | 0 | 0 | 0 | 0 | 0** Part II – Payor Information

7 Payor's Name (Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual)

National Research Council of the Philippines

8 Registered Address **8A ZIP Code** _____

General Santos Ave, Bicutan, Taguig City

Part III – Details of Monthly Income Payments and Taxes Withheld

Income Payments Subject to Expanded Withholding Tax	ATC	1st Month of the Quarter	2nd Month of the Quarter	3rd Month of the Quarter	Total	Tax Withheld for the Quarter
Income payments made by the government and government-owned and controlled corporations (GOCCs) to its local residents suppliers of services other than those covered by <small>the Data Privacy Act of 2012 (DPA) (RA No. 10173) for legitimate and lawful purposes.</small>	WI 157	29,757.50	29,757.50	29,757.50	89,272.50	1,785.45
Total						1,785.45
Money Payments Subject to Withholding of Business Tax (Government & Private)						
Total						

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. Further, we give our consent to the processing of our information as contemplated under the "Data Privacy Act of 2012" (RA No. 10173) for legitimate and lawful purposes.

DANILO A. SALILLAS.

Accountant **II**

Signature over Printed Name of Payor/Payee's Authorized Representative/Tax Agent
(Indicate Title/Designation and TIN)

Tax Agent Accreditation No./
Attorney's Roll No. (if applicable) **Date of Issue (MM/DD/YYYY)** **Date of Expiry (MM/DD/YYYY)**

CONFORME:

Signature over Printed Name of Payee/Payor's Authorized Representative/Tax Agent
(Indicate Title/Designation and TIN)

Tax Agent Accreditation No./
Attorney's Roll No. (if applicable) **Date of Issue (MM/DD/YYYY)** **Date of Expiry (MM/DD/YYYY)**

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