



# Certificate of Creditable Tax Withheld At Source

BIR Form No.

2307

March 2003 (ENCS)

1 For the Period From    (MM/DD/YY) To    (MM/DD/YY)

Part I	Payee Information
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2	Taxpayer Identification Number		
3	Payee's Name	<p>(Last Name, First Name, Middle Name for Individuals) (Registered Name for Non-Individuals)</p>	
4	Registered Address		<b>4A</b> Zip Code
5	Foreign Address		<b>5A</b> Zip Code

## Payor Information

<b>6</b>	Taxpayer Identification Number ▶	<div style="border: 1px solid black; padding: 2px;"> <div style="background-color: #ccc; width: 15px; height: 15px; display: inline-block;"></div> <div style="background-color: #ccc; width: 15px; height: 15px; display: inline-block;"></div> <div style="background-color: #ccc; width: 15px; height: 15px; display: inline-block;"></div> <div style="width: 15px; height: 15px; display: inline-block; text-align: center;">0</div> <div style="width: 15px; height: 15px; display: inline-block; text-align: center;">0</div> <div style="width: 15px; height: 15px; display: inline-block; text-align: center;">0</div> </div>
<b>7</b>	Payor's Name ▶	<div style="border: 1px solid black; padding: 2px;"> <div style="text-align: right; font-size: small;">(Last Name, First Name, Middle Name for Individuals) (Registered Name for Non-Individuals)</div> </div>
<b>8</b>	Registered Address ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60%;"> <div style="background-color: #ccc; width: 100%; height: 15px;"></div> </div> <div style="margin-left: 10px;"> <b>8A</b> Zip Code ▶           <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="width: 15px; height: 15px; display: inline-block; text-align: center;">1</div> <div style="width: 15px; height: 15px; display: inline-block; text-align: center;">1</div> <div style="width: 15px; height: 15px; display: inline-block; text-align: center;">0</div> <div style="width: 15px; height: 15px; display: inline-block; text-align: center;">4</div> </div> </div>

PART II	Details of Monthly Income Payments and Tax Withheld for the Quarter
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[illegible]

We 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.

9

Payor/Payor's Authorized Representative  
(Signature Over Printed Name)

10

Title/Position of Signatory

Conforme:

Payee/Payee's Authorized Representative  
Signature Over Printed Name

Date Signed \_\_\_\_\_