



BIR Form No.

2316

January 2018 (ENCS)

**Certificate of Compensation
Payment/Tax Withheld**

For Compensation Payment With or Without Tax Withheld



2316 01/18ENCS

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

<p>1 For the Year (YYYY) <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="2"/> <input type="text" value="1"/></p> <p>Part I - Employee Information</p> <p>3 TIN <input type="text" value="5"/> <input type="text" value="1"/> <input type="text" value="3"/> - <input type="text" value="6"/> <input type="text" value="7"/> <input type="text" value="7"/> - <input type="text" value="1"/> <input type="text" value="1"/> <input type="text" value="2"/> - <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/></p> <p>4 Employee's Name (Last Name, First Name, Middle Name) <input type="text" value="Ferrer II, Eduardo V."/> 5 RDO Code <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="1"/></p> <p>6 Registered Address <input type="text" value="LahoyLahoy St., Lamac, Consolacion, Cebu"/> 6A ZIP Code <input type="text" value=""/></p> <p>6B Local Home Address <input type="text" value=""/> 6C ZIP Code <input type="text" value=""/></p> <p>6D Foreign Address <input type="text" value=""/></p> <p>7 Date of Birth (MM/DD/YYYY) <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="1"/> 8 Contact Number <input type="text" value=""/></p> <p>9 Statutory Minimum Wage rate per day <input type="text" value=""/></p> <p>10 Statutory Minimum Wage rate per month <input type="text" value=""/></p> <p>11 <input type="checkbox"/> Minimum Wage Earner (MWE) whose compensation is exempt from withholding tax and not subject to income tax</p> <p>Part II - Employer Information (Present)</p> <p>12 TIN <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/> - <input type="text" value="9"/> <input type="text" value="6"/> <input type="text" value="4"/> - <input type="text" value="5"/> <input type="text" value="4"/> <input type="text" value="1"/> - <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/></p> <p>13 Employer's Name <input type="text" value="VCUSTOMER PHILIPPINES CEBU INC"/></p> <p>14 Registered Address <input type="text" value="Jesa ITC 90 Gen Maxilom Avenue Cebu City Cebu"/> 14A ZIP Code <input type="text" value="6"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/></p> <p>15 Type of Employer <input checked="" type="checkbox"/> Main Employer <input type="checkbox"/> Secondary Employer</p> <p>Part III - Employer Information (Previous)</p> <p>16 TIN <input type="text" value=""/></p> <p>17 Employer's Name <input type="text" value=""/></p> <p>18 Registered Address <input type="text" value=""/> 18A ZIP Code <input type="text" value=""/></p> <p>Part IVA - Summary</p> <table style="width:100%;"> <tr> <td style="width:70%;">19 Gross Compensation Income from Present Employer (Sum of Items 36 and 50)</td> <td style="width:30%; text-align: right;"><input type="text" value="11,910.62"/></td> </tr> <tr> <td>20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 36)</td> <td style="text-align: right;"><input type="text" value="3,697.95"/></td> </tr> <tr> <td>21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 50)</td> <td style="text-align: right;"><input type="text" value="8,212.67"/></td> </tr> <tr> <td>22 Add: Taxable Compensation Income from Previous Employer, if applicable</td> <td style="text-align: right;"><input type="text" value=""/></td> </tr> <tr> <td>23 Gross Taxable Compensation Income (Sum of Items 21 and 22)</td> <td style="text-align: right;"><input type="text" value="8,212.67"/></td> </tr> <tr> <td>24 Tax Due</td> <td style="text-align: right;"><input type="text" value=""/></td> </tr> <tr> <td>25 Amount of Taxes Withheld</td> <td style="text-align: right;"><input type="text" value=""/></td> </tr> <tr> <td>25A Present Employer</td> <td style="text-align: right;"><input type="text" value=""/></td> </tr> <tr> <td>25B Previous Employer, if applicable</td> <td style="text-align: right;"><input type="text" value=""/></td> </tr> <tr> <td>26 Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B)</td> <td style="text-align: right;"><input type="text" value=""/></td> </tr> </table>	19 Gross Compensation Income from Present Employer (Sum of Items 36 and 50)	<input type="text" value="11,910.62"/>	20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 36)	<input type="text" value="3,697.95"/>	21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 50)	<input type="text" value="8,212.67"/>	22 Add: Taxable Compensation Income from Previous Employer, if applicable	<input type="text" value=""/>	23 Gross Taxable Compensation Income (Sum of Items 21 and 22)	<input type="text" value="8,212.67"/>	24 Tax Due	<input type="text" value=""/>	25 Amount of Taxes Withheld	<input type="text" value=""/>	25A Present Employer	<input type="text" value=""/>	25B Previous Employer, if applicable	<input type="text" value=""/>	26 Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B)	<input type="text" value=""/>	<p>2 For the Period From (MM/DD) <input type="text" value="1"/> <input type="text" value="2"/> <input type="text" value="1"/> <input type="text" value="0"/> To (MM/DD) <input type="text" value="1"/> <input type="text" value="2"/> <input type="text" value="3"/> <input type="text" value="1"/></p> <p>Part IV-B Details of Compensation Income & Tax Withheld from Present Employer</p> <table style="width:100%;"> <thead> <tr> <th style="width:80%;">A. 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I/We declare, under the penalties of perjury that this certificate has been made in good faith, verified by me/us, and to the best of my/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, I/we give my/our consent to the processing of my/our information as contemplated under the "Data Privacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes.

51 <u>Morris F. Quilondrino</u> Present Employer/Authorized Agent Signature over Printed Name	Date Signed <input type="text" value="0"/> <input type="text" value="3"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="2"/> <input type="text" value="2"/>
CONFORME: 52 <u>Ferrer II, Eduardo V.</u> Employee Signature over Printed Name	Date Signed <input type="text" value=""/>
CTC/Valid ID No. of Employee <input type="text" value="3512116984"/> Place of Issue <input type="text" value=""/>	Date Signed <input type="text" value=""/> Amount paid, if CTC <input type="text" value=""/>

To be accomplished under substituted filing

<p>I declare, under the penalties of perjury that the information herein stated are reported under BIR Form No. 1604-C which has been filed with the Bureau of Internal Revenue.</p> <p>53 _____ Present Employer/Authorized Agent Signature over Printed Name (Head of Accounting/Human Resource or Authorized Representative)</p>	<p>I declare, under the penalties of perjury that I am qualified under substituted filing of Income Tax Return (BIR Form No. 1700), since I received purely compensation income from only one employer in the Philippines for the calendar year; that taxes have been correctly withheld by my employer (tax due equals tax withheld); that the BIR Form No. 1604-C filed by my employer to the BIR shall constitute as my income tax return; and that BIR Form No. 2316 shall serve the same purpose as if BIR Form No. 1700 has been filed pursuant to the provisions of Revenue Regulations (RR) No. 3-2002, as amended.</p> <p>54 _____ Employee Signature over Printed Name</p>
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