



Certificate of Compensation Payment/Tax Withheld

For Compensation Payment With or Without Tax Withheld

<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">1</td> <td style="width:40%;">For the year (YYYY)</td> <td style="width:10%;">2018</td> <td style="width:10%;"></td> <td style="width:10%;"></td> <td style="width:10%;"></td> </tr> <tr> <td colspan="6">Part I Employee Information</td> </tr> <tr> <td>3</td> <td>Tax Payer Identification No.</td> <td>309 200 147 000</td> <td colspan="3"></td> </tr> <tr> <td>4</td> <td>Employee's Name (Last Name, First Name, Middle Name)</td> <td colspan="4">Hoylar, Ryshiel Ferras</td> </tr> <tr> <td>6</td> <td>Registered Address</td> <td colspan="4">6A Zip Code</td> </tr> <tr> <td>6B</td> <td>Local Home Address</td> <td colspan="4">6C Zip Code</td> </tr> <tr> <td>6D</td> <td>Foreign Address</td> <td colspan="4">6E Zip Code</td> </tr> <tr> <td>7</td> <td>Date of Birth (MM/DD/YYYY)</td> <td>12 03 1989</td> <td>8</td> <td>Telephone number</td> <td></td> </tr> <tr> <td>9</td> <td>Exemption Status</td> <td colspan="4"><input checked="" type="checkbox"/> Single <input type="checkbox"/> Married</td> </tr> <tr> <td>9A</td> <td colspan="5">Is the wife claiming the additional exemption for qualified dependent children? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> </tr> <tr> <td>10</td> <td>Name of Qualified Dependent Children</td> <td colspan="4">11 Date of Birth (MM/DD/YYYY)</td> </tr> <tr> <td>12</td> <td>Statutory Minimum Wage rate per day</td> <td>12</td> <td colspan="3"></td> </tr> <tr> <td>13</td> <td>Statutory Minimum Wage rate per month</td> <td>13</td> <td colspan="3"></td> </tr> <tr> <td>14</td> <td colspan="5"><input type="checkbox"/> Minimum Wage Earner whose compensation is exempt from withholding tax and not subject to income tax</td> </tr> <tr> <td colspan="6">Part II Employer Information (Present)</td> </tr> <tr> <td>15</td> <td>Taxpayer Identification No.</td> <td>243 882 270</td> <td colspan="3"></td> </tr> <tr> <td>16</td> <td>Employer's Name</td> <td colspan="4">24/7 CUSTOMER PHILIPPINES, INC.</td> </tr> <tr> <td>17</td> <td>Registered Address</td> <td colspan="2">8767 Paseo de Roxas Makati City</td> <td colspan="2">17A Zip Code 1226</td> </tr> <tr> <td colspan="6"><input checked="" type="checkbox"/> main employer <input type="checkbox"/> secondary employer</td> </tr> <tr> <td colspan="6">Part III Employer Information (Previous-1)</td> </tr> <tr> <td>18</td> <td>Taxpayer Identification No.</td> <td colspan="4">18</td> </tr> <tr> <td>19</td> <td>Employer's Name</td> <td colspan="4"></td> </tr> <tr> <td>20</td> <td>Registered Address</td> <td colspan="4">20A Zip Code</td> </tr> <tr> <td colspan="6" style="text-align: center;">Summary</td> </tr> <tr> <td>21</td> <td>Gross Compensation Income from Present Employer (Item 41 plus Item 55)</td> <td>21</td> <td>10,960.55</td> <td colspan="2"></td> </tr> <tr> <td>22</td> <td>Less: Total Non-Taxable/Exempt (Item 41)</td> <td>22</td> <td>1,097.49</td> <td colspan="2"></td> </tr> <tr> <td>23</td> <td>Taxable Compensation Income from Present Employer (Item 55)</td> <td>23</td> <td>9,863.06</td> <td colspan="2"></td> </tr> <tr> <td>24</td> <td>Add: Taxable Compensation Income from Previous Employer</td> <td>24</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>25</td> <td>Gross Taxable Compensation Income</td> <td>25</td> <td>9,863.06</td> <td colspan="2"></td> </tr> <tr> <td>26</td> <td>Less: Total Exemptions</td> <td>26</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>27</td> <td>Less: Premiums Paid on Health and/or Hospital Insurance (if applicable)</td> <td>27</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>28</td> <td>Net Taxable Compensation Income</td> <td>28</td> <td>9,863.06</td> <td colspan="2"></td> </tr> <tr> <td>29</td> <td>Tax Due</td> <td>29</td> <td>0.00</td> <td colspan="2"></td> </tr> <tr> <td>30</td> <td>Amount of Taxes Withheld</td> <td colspan="4"></td> </tr> <tr> <td>30A</td> <td>Present Employer</td> <td>30A</td> <td>0.00</td> <td colspan="2"></td> </tr> <tr> <td>30B</td> <td>Previous Employer</td> <td>30B</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>31</td> <td>Total Amount of Taxes Withheld As adjusted</td> <td>31</td> <td>0.00</td> <td colspan="2"></td> </tr> </table>	1	For the year (YYYY)	2018				Part I Employee Information						3	Tax Payer Identification No.	309 200 147 000				4	Employee's Name (Last Name, First Name, Middle Name)	Hoylar, Ryshiel Ferras				6	Registered Address	6A Zip Code				6B	Local Home Address	6C Zip Code				6D	Foreign Address	6E Zip Code				7	Date of Birth (MM/DD/YYYY)	12 03 1989	8	Telephone number		9	Exemption Status	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married				9A	Is the wife claiming the additional exemption for qualified dependent children? 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NON-TAXABLE/EXEMPT COMPENSATION INCOME</td> </tr> <tr> <td>32</td> <td>Basic Salary/ Statutory Minimum Wage Minimum Wage Earner (MWE)</td> <td>32</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>33</td> <td>Holiday Pay (MWE)</td> <td>33</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>34</td> <td>Overtime Pay (MWE)</td> <td>34</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>35</td> <td>Night Shift Differential (MWE)</td> <td>35</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>36</td> <td>Hazard Pay (MWE)</td> <td>36</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>37</td> <td>13th Month Pay and Other Benefits</td> <td>37</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>38</td> <td>De Minimis Benefits Other Benefits</td> <td>38</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>39</td> <td>SSS, GSIS, PHIC & Pag-IBIG Contributions & Union dues (Employee share only)</td> <td>39</td> <td>443.85</td> <td colspan="2"></td> </tr> <tr> <td>40</td> <td>Salaries & Other forms of Compensation</td> <td>40</td> <td>653.64</td> <td colspan="2"></td> </tr> <tr> <td>41</td> <td>Total Non-Taxable/Exempt Compensation Income</td> <td>41</td> <td>1,097.49</td> <td colspan="2"></td> </tr> <tr> <td colspan="6" style="text-align: center;">B. TAXABLE COMPENSATION INCOME</td> </tr> <tr> <td colspan="6" style="text-align: center;">REGULAR</td> </tr> <tr> <td>42</td> <td>Basic Salary</td> <td>42</td> <td>3,384.88</td> <td colspan="2"></td> </tr> <tr> <td>43</td> <td>Representation</td> <td>43</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>44</td> <td>Transportation</td> <td>44</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>45</td> <td>Cost of Living Allowance</td> <td>45</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>46</td> <td>Fixed Housing Allowance</td> <td>46</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>47</td> <td>Others (Specify)</td> <td>47</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>47A</td> <td></td> <td>47A</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>47B</td> <td></td> <td>47B</td> <td></td> <td colspan="2"></td> </tr> <tr> <td colspan="6" style="text-align: center;">SUPPLEMENTARY</td> </tr> <tr> <td>48</td> <td>Commission</td> <td>48</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>49</td> <td>Profit Sharing</td> <td>49</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>50</td> <td>Fees Including Director's Fees</td> <td>50</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>51</td> <td>Taxable 13th Month Pay and Other Benefits</td> <td>51</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>52</td> <td>Hazard Pay</td> <td>52</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>53</td> <td>Overtime Pay</td> <td>53</td> <td>2,971.72</td> <td colspan="2"></td> </tr> <tr> <td>54</td> <td>Others (Specify)</td> <td>54</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>54A</td> <td></td> <td>54A</td> <td>3,506.46</td> <td colspan="2"></td> </tr> <tr> <td>54B</td> <td></td> <td>54B</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>55</td> <td>Total Taxable Compensation Income</td> <td>55</td> <td>9,863.06</td> <td colspan="2"></td> </tr> </table>	2	For the period From (MM/DD)	01 01	To (MM/DD)	01 01		Part IV Details of Compensation Income and Tax Withheld from Present Employer						A. NON-TAXABLE/EXEMPT COMPENSATION INCOME						32	Basic Salary/ Statutory Minimum Wage Minimum Wage Earner (MWE)	32				33	Holiday Pay (MWE)	33				34	Overtime Pay (MWE)	34				35	Night Shift Differential (MWE)	35				36	Hazard Pay (MWE)	36				37	13th Month Pay and Other Benefits	37				38	De Minimis Benefits Other Benefits	38				39	SSS, GSIS, PHIC & Pag-IBIG Contributions & Union dues (Employee share only)	39	443.85			40	Salaries & Other forms of Compensation	40	653.64			41	Total Non-Taxable/Exempt Compensation Income	41	1,097.49			B. TAXABLE COMPENSATION INCOME						REGULAR						42	Basic Salary	42	3,384.88			43	Representation	43				44	Transportation	44				45	Cost of Living Allowance	45				46	Fixed Housing Allowance	46				47	Others (Specify)	47				47A		47A				47B		47B				SUPPLEMENTARY						48	Commission	48				49	Profit Sharing	49				50	Fees Including Director's Fees	50				51	Taxable 13th Month Pay and Other Benefits	51				52	Hazard Pay	52				53	Overtime Pay	53	2,971.72			54	Others (Specify)	54				54A		54A	3,506.46			54B		54B				55	Total Taxable Compensation Income	55	9,863.06		
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45	Cost of Living Allowance	45																																																																																																																																																																																																																																																																																																																																																																																																																																									
46	Fixed Housing Allowance	46																																																																																																																																																																																																																																																																																																																																																																																																																																									
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<p>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.</p> <p>56 <u>MARIA CRISelda O. AGREGADO-ONG</u> Present Employer/Authorized Agent Signature Over Printed Name</p> <p>CONFORME: 57 <u>Hoylar, Ryshiel Ferras</u> CTC No. _____ Employee Signature Over Printed Name of Employee _____ Place of Issue _____</p> <p style="text-align: right;">Date Signed _____ Date Signed _____ Date of Issue _____ Amount Paid _____</p>																																																																																																																																																																																																																																																																																																																																																																																																																																											
<p>I declare, under the penalties of perjury, that the information herein stated are reported under BIR Form No. 1604CF which have been filed with the Bureau of Internal Revenue</p> <p>58 <u>MARIA CRISelda O. AGREGADO-ONG</u> 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 Returns (BIR Form No. 1700), since I received purely compensation income from only one employer in the Phils. for the calendar year; that taxes have been correctly withheld by my employer (tax due equals tax withheld); that the BIR form No. 1604CF 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 had been filed pursuant to the provisions of RR 3-2002, as amended.</p> <p>59 <u>Hoylar, Ryshiel Ferras</u> Employee Signature Over Printed Name</p>																																																																																																																																																																																																																																																																																																																																																																																																																																								