

CERTIFICATE OF EMPLOYMENT

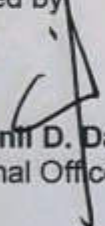
This is to certify that **Ms. Margarita C. Silva** was an employee of **Flour, Inc.** Details of her employment with the company are provided herein.

Date Hired	:	January 11, 2023
Date Resigned	:	April 19, 2024
Designation	:	HR Assistant
Exit Clearance Status	:	Cleared last May 16, 2024

This certification is issued upon the request of Ms. Silva for future employment purposes only.

Issued this 21st day of May 2024 in Cebu City, Philippines.

Certified by


Tessanli D. Dayola
Regional Office Administrator

Republic of the Philippines
Department of Justice
National Bureau of Investigation



39428744

This is to certify that the person whose name, picture, signature and thumbprint appearing below applied for NBI Clearance and the results is as follows.

NBI ID NO
S410KMLA00-ML12918817

FAMILY NAME
SILVA

MIDDLE NAME
CANE

ADDRESS
Z1 404 RAMONA VILLAGE BARANGAY DUMLOG TALISAY CITY CEBU

DATE OF BIRTH
November 12, 2000

CITIZENSHIP
FILIPINO

PURPOSE
MULTI-PURPOSE CLEARANCE

REMARKS
NO DEROGATORY RECORD

VALID UNTIL
May 13, 2025

FIRST NAME
MARGARITA

HUSBAND'S SURNAME

PLACE OF BIRTH
TALISAY CEBU

CIVIL STATUS
SINGLE



SIGNATURE

GENDER
FEMALE



Date Printed: Thursday, 23 May 2024 08:14 am



S410KMLA00-ML12918817

1936
ATTY. MEDARDO G. DE LEMOS
Director

Agency	ML12	DATID	peyj
CASID	peyj	BIOD	peyj
O.R. No.	15LQEUJ	RECID	bataraj
O.R. Date	13/05/2024 9:43:06 am	INTID	
DST PAID		PRTID	barrientosnr



For BIR BCS/
Use Only Item.

BIR Form No.
2316

January 2018 (ENC-5)

Certificate of Compensation Payment/Tax Withheld

For Compensation Payment With or Without Tax Withheld



2316 01/18/ENC5

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

1 For the Year (YYYY) **2 0 1 2 1 4**

Part I - Employee Information

3 TIN **6 1 8 - 3 1 4 - 0 5 6 - 0 0 0 0 1**

4 Employee's Name (Last Name, First Name, Middle Name) **SILVA, MARGARITA, CANE**

5 RDO Code **0 4 1**

6 Registered Address **RAMONA VILLAGE, BRGY. DUMLOG, CITY OF TALISAY, CEBU**

6A ZIP Code **6 0 4 5**

6B Local Home Address

6C ZIP Code

6D Foreign Address

7 Date of Birth (MMDDYYYY) **1 1 1 2 2 0 0 0**

8 Contact Number **0 9 1 6 2 7 8 0 8 4 6**

9 Statutory Minimum Wage rate per day

10 Statutory Minimum Wage rate per month

11 Minimum Wage Earner (MWE) whose compensation is exempt from withholding tax and not subject to income tax

Part II - Employer Information (Present)

12 TIN **0 0 8 - 3 7 6 - 0 6 3 - 0 0 0 0 1**

13 Employer's Name **FLOUR, INC.**

14 Registered Address **SHANGRI-LA PLAZA MALL, MANDALUYONG CITY**

14A ZIP Code **1 5 5 0**

15 Type of Employer Main Employer Secondary Employer

Part III - Employer Information (Previous)

16 TIN

17 Employer's Name

18 Registered Address

18A ZIP Code

Part IVA - Summary

19 Gross Compensation Income from Present Employer (Sum of Items 36 and 50) **87,315.43**

20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 36) **13,990.53**

21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 50) **73,324.90**

22 Add: Taxable Compensation Income from Previous Employer, if applicable **0.00**

23 Gross Taxable Compensation Income (Sum of Items 21 and 22) **73,324.90**

24 Tax Due **0.00**

25 Amount of Taxes Withheld

25A Present Employer **0.00**

25B Previous Employer, if applicable **0.00**

26 Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B) **0.00**

2 For the Period From (MMDD) **0 1 0 1** To (MMDD) **0 4 1 9**

Part IV-B Details of Compensation Income & Tax Withheld from Present Employer

A. NON-TAXABLE/EXEMPT COMPENSATION INCOME	Amount
27 Basic Salary (Including the exempt P250,000 & below or the Statutory Minimum Wage of the MWE)	0.00
28 Holiday Pay (MWE)	0.00
29 Overtime Pay (MWE)	0.00
30 Night Shift Differential (MWE)	0.00
31 Hazard Pay (MWE)	0.00
32 13th Month Pay and Other Benefits (maximum of P90,000)	6,144.94
33 De Minimis Benefits	3,315.59
34 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only)	4,530.00
35 Salaries and Other Forms of Compensation	0.00
36 Total Non-Taxable/Exempt Compensation Income (Sum of Items 27 to 35)	13,990.53

B. TAXABLE COMPENSATION INCOME REGULAR

37 Basic Salary	73,324.90
38 Representation	0.00
39 Transportation	0.00
40 Cost of Living Allowance (COLA)	0.00
41 Fixed Housing Allowance	0.00
42 Others (specify)	
42A	0.00
42B	0.00
SUPPLEMENTARY	
43 Commission	0.00
44 Profit Sharing	0.00
45 Fees including Director's Fees	0.00
46 Taxable 13th Month Benefits	0.00
47 Hazard Pay	0.00
48 Overtime Pay	0.00
49 Others (specify)	
49A	0.00
49B	0.00
50 Total Taxable Compensation Income (Sum of Items 37 to 49B)	73,324.90

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 **ANGEL ANTONIO VALLE** Present Employer/Authorized Agent Signature over Printed Name Date Signed **0 5 2 2 2 0 2 4**

CONFORME: 52 **MARGARITA C. SILVA** Employee Signature over Printed Name Date Signed **0 5 2 2 2 0 2 4**

CTC/Valid ID No. of Employee _____ Place of Issue _____ Date Issued _____ Amount paid, if CTC _____

To be accomplished under substituted filing

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.

53 **ANGEL ANTONIO VALLE** Present Employer/Authorized Agent Signature over Printed Name (Head of Accounting/ Human Resource or Authorized Representative)

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.

54 **MARGARITA C. SILVA** Employee Signature over Printed Name

*NOTE: The BIR Data Privacy is in the BIR website (www.bir.gov.ph)