



Republic of the Philippines
SOCIAL SECURITY SYSTEM
SS NUMBER SLIP.

SS Number: 06-4262042-4
ETURMA, JOSHUA JURADO
Birthdate: 01/20/2000



06-4262042-4 ETURMA, JOSHUA JURADO

Certificate of Compensation
Payment/Tax Withheld

For Compensation Payment With or Without Tax Withheld



BIR Form No. 2316

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

1 For the Year (YYYY) 20232 For the Period from (MM/DD) 05/05 To (MM/DD) 12/31

Part I - Employee Information

3 TIN 362-500-167-000004 Employee's Name (Last Name, First Name, Middle Name) Etame, Joshua, Junado5 Registered Address Maguyayayon, Verde Compound Kawitbayan, Cebu City6 Local Home Address 7 Date of Birth (MM/DD/YYYY) 01/02/008 Contact Number 00009 Statutory Minimum Wage rate per day 0.0010 Statutory Minimum Wage rate per month 0.0011 Minimum Wage Earner (MWE) whose compensation is exempt from withholding tax and not subject to income tax

Part II - Employer Information (Present)

12 TIN 010-893840-0000013 Employer's Name Providence Business Services Corporation14 Registered Address 88 FLOOR CYBERGATE GALLERIA CEBU COMMERCE BT. CORMINEDICTO ST. BRGY. TERNADO CEBU CITY15 Type of Employer Man Employer Secondary Employer

Part III - Employer Information (Previous)

16 TIN 17 Employer's Name 18 Registered Address

Part IVA - Summary

19 Gross Compensation Income from Present Employer (Sum of Items 28 and 52) 202,801.5620 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 36) 51,200.8621 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 50) 151,591.6422 Add: Taxable Compensation Income from Previous Employer, if applicable 0.0023 Gross Taxable Compensation Income (Sum of Items 21 and 22) 151,591.6424 Tax Due 0.0025 Amount of Taxes Withheld 0.0026 Total Amount of Taxes Withheld as adjusted (Sum of Items 24 and 25) 0.0027 5% Tax Credit (PERA Act of 2006) 0.0028 Total Taxes Withheld (Sum of Items 26 and 27) 0.00

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

A. NON-TAXABLE/EXEMPT COMPENSATION INCOME Amount

29 Basic Salary (including the exempt P40,000.00 salary or the Statutory Minimum Wage (SMW)) 0.0030 Holiday Pay (MWE) 0.0031 Overtime Pay (MWE) 0.0032 Night Shift Differential (MWE) 0.0033 Hazard Pay (MWE) 0.0034 13th Month Pay and Other Benefits (Maximum of P90,000) 23,806.9035 De Meritis Benefits 15,091.6636 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only) 12,012.0037 Debitos & Other Funds of Compensation 800.0038 Total Non-Taxable/Exempt Compensation Income (Sum of Items 29 to 37) 51,200.86

B. TAXABLE COMPENSATION INCOME REGULAR

39 Basic Salary 117,067.6640 Representation 0.0041 Transportation 0.0042 Cost of Living Allowance (COLA) 0.0043 Fixed Housing Allowance 0.0044 Others (Specify) 44A 0.0044B 0.00

SUPPLEMENTARY

45 Commission 0.0046 Prisk Sharing 0.0047 Fees Including Director's Fees 0.0048 Taxable 13th Month Benefits 0.0049 Hazard Pay 0.0050 Overtime Pay 24,024.4651 Others (Specify) 51A 0.0051B 0.0052 Total Taxable Compensation Income (Sum of Items 39 to 51B) 151,591.64

With declare, under the penalty of perjury that the certificate has been made in good faith, verified by means, and to the best of my/her 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/her consent to the processing of my/her information as contemplated under the "Data Privacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes.

53 Providence Business Services Corporation
Present Employer/ Authorized Agent Signature Over Printed NameDate Signed 01/31/202454 Etame, Joshua, Junado
Employee Signature Over Printed NameDate Signed CTCA/Valid ID No. of Employee Place of Issue Date Issued

Amount Paid, if CTC

To be accomplished under substituted filing

I declare, under the penalty of perjury that the information herein stated are required under BIR Form No. 1001-C which has been filed with the Bureau of Internal Revenue:

55 Providence Business Services Corporation
Present Employer/Authorized Agent Signature Over Printed Name
(Head of Accounting/ Human Resource or Authorized Representative)

I declare under the penalty of perjury that I am qualified under substituted filing of Income Tax Returns (BIR Form No. 1001) and I received purely compensation income from one employer in the Philippines in the calendar year. Deductions have been correctly withheld by the employer (for due record tax withheld) on the BIR Form No. 1001-C filed by my employer to the BIR and complete copies are being submitted and that BIR Form No. 2018 will be filed to the Commissioner as IRR Form No. 1700001 upon submission to the provisions of Revenue Regulations (RR) No. 7-2002 as amended.

56
Employee Signature Over Printed Name



Republic of the Philippines
Department of Justice
National Bureau of Investigation



39433798

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 E365AJTA00-R71562140	VALID UNTIL March 06, 2025
FAMILY NAME ETURMA	FIRST NAME JOSHUA
MIDDLE NAME JURADO	HUSBAND'S SURNAME
ADDRESS MAGSAYSAY EXT VERDIDE COMPD BRGY KASAMBAGAN CEBU CITY	
DATE OF BIRTH January 20, 2000	PLACE OF BIRTH MANDAUE CITY CEBU
CITIZENSHIP FILIPINO	CIVIL STATUS MARRIED
PURPOSE MULTI-PURPOSE CLEARANCE	GENDER MALE
REMARKS NO RECORD ON FILE	



SIGNATURE

PERSONAL COPY



Date Printed: Wednesday, March 06, 2024 02:47 PM

Agency	R7	DATID	villarinn
CASID	villarinn	BIOD	villarinn
O.R No	MP2ASL9HUJ	REGID	
O.R Date	03/06/2024 2:42:56 PM	INTID	
DST PAID		PRTID	villarinn

Medardo G. de Lemos
ATTY. MEDARDO G. DE LEMOS
Director



E365AJTA00-R71562140