

Date : 11/28/2024

To : HR DEPARTMENT

## WAIVER

This is to certify that I, Mr./Ms. CHARITY MAE DIANNE PEPINO, of legal age, with postal address at ST. JUDE PHASE IV BULACAO CEBU CITY and presently working with **IPLOY, OPC.** as CSR with valid **Taxpayer Identification Number (TIN)** 636 - 012 - 923 - 000, certify that I was not able to submit the required **Certificate of Income Tax on Compensation (BIR Form 2316)** from my previous employer for the taxable year 2024 due to the following reason(s);

Please check reason(s) provided.

No Previous Employer for 2024.

Certificate of Income tax on Compensation (BIR Form No. 2316) was not available from my previous employer.

I further certify that any taxes due from me as a result of my failure to submit the above minutes to **IPLOY, OPC** will be borne by me, and I will pay them directly to the Bureau of Internal Revenue (BIR) upon filing my **Income Tax Return (ITR)** for the year 2024.

CHARITY MAE DIANNE PEPINO  
Employee Name & Signature

4994  
Employee ID Number