



Republika ng Pilipinas  
Kagawaran ng Pansalapi  
Kawanihan ng Rentas Internas

# Certificate of Compensation Payment/Tax Withheld

BIR Form No.  
**2316**  
July 2008 (ENCS)

For Compensation Payment With or Without Tax Withheld

1 For the Year (YYYY) **2018** 2 For the Period From (MM/DD) **01 01** To (MM/DD) **07 30**

**Part I Employee Information**

3 Taxpayer Identification No. **331-680-671**

4 Employee's Name (Last Name, First Name, Middle Name) **Airose Jean Quillojano Ramo** 5 RDO Code **123**

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) **08 13 1992** 8 Telephone Number

9 Exemption Status  Single  Married

9A Is the wife claiming the additional exemption for qualified dependent children?  Yes  No

10 Name of Qualified Dependent Children 11 Date of Birth (MM/DD/YYYY)

12 Statutory Minimum Wage rate per day 12

13 Statutory Minimum Wage rate per month 13

14  Minimum Wage Earner whose compensation is exempt from withholding tax and not subject to income tax

**Part II Employer Information (Present)**

15 Taxpayer Identification No. **006-897-563-000**

16 Employer's Name **WIPRO BPO PHILIPPINES LTD. INC.**

17 Registered Address **CEBU IT TOWER LT7 BLK2 COR. ARCH REYES ST** 17A Zip Code

18  Main Employer  Secondary Employer

**Part III Employer Information (Previous)**

19 Taxpayer Identification No.

19 Employer's Name

20 Registered Address 20A Zip Code

**Part IV-A Summary**

21 Gross Compensation Income from Present Employer (Item 41 plus Item 55)	21	143895.22
22 Less: Total Non-Taxable/Exempt Compensation Income (Item 41)	22	42815.97
23 Taxable Compensation Income from Present Employer (Item 55)	23	101079.25
24 Add: Taxable Compensation Income from Previous Employer	24	
25 Gross Taxable Compensation Income	25	101079.25
26 Less: Total Exemptions	26	0
27 Less: Premium Paid on health and/or hospital insurance (if applicable)	27	
28 Net Taxable Compensation Income	28	101079.25
29 Tax Due	29	0
30 Amount of Taxes Withheld	30	0
30A Present Employer	30A	0
30B Previous Employer	30B	
31 Total Amount of Taxes Withheld	31	0

**Part IV-B 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	18316.02
38 De Minimis Benefits	38	17464.46
39 SSS, GSIS, PHIC & Pag-ibig Contributions, & Union Dues (Employee share only)	39	6249.45
40 Salaries & Other Forms of Compensation	40	786.04
41 Total Non-Taxable/Exempt Compensation Income	41	42815.97

**B. TAXABLE COMPENSATION INCOME**

**REGULAR**

42 Basic Salary	42	71357.17
43 Representation	43	
44 Transportation	44	
45 Cost of Living Allowance	45	
46 Fixed Housing Allowance	46	
47 Others (Specify)	47	
47A MEDICAL/SALADOTHERY	47A	14526.97
47B	47B	

**SUPPLEMENTARY**

48 Commission	48	
49 Dues/Charges	49	
50 Fees Including Director's Fees	50	
51 Taxable 13th Month Pay and Other Benefits	51	0.00
52 Hazard Pay	52	
53 Overtime Pay	53	15193.11
54 Others (Specify)	54	
54A	54A	
54B	54B	
55 Total Taxable Compensation Income	55	101079.25

We declare, under the penalties of perjury, that the information herein stated is true and correct as reported pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under authority thereof.

56 Present Employer Authorized Representative (Printed Name) **RISNA H. MALAQUIL** Date Signed \_\_\_\_\_

57 Date of Issue **09 27 2018** Amount Paid \_\_\_\_\_

**TO BE ACCOMPLISHED UNDER SUBSTITUTED FILING**

I declare, under the penalties of perjury, that the information herein stated are reported under BIR Form No. 1604CF which has been filed with the Bureau of Internal Revenue.

58 Present Employer Authorized Representative (Printed Name) **RISNA H. MALAQUIL** Date Signed \_\_\_\_\_

59 Date of Issue \_\_\_\_\_ Amount Paid \_\_\_\_\_