



BIR Form No. <h1 style="margin:0;">2316</h1> January 2018 (ENCS)	<h2 style="margin:0;">Certificate of Compensation Payment/Tax Withheld</h2> For Compensation Payment With or Without Tax Withheld	2316 01/18ENCS
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Fill in all applicable spaces. Mark all appropriate boxes with an "X"

<b>1</b> For the Year (YYYY) <span style="border: 1px solid black; padding: 2px;">2025</span>	<b>2</b> For the Period From (MM/DD) <span style="border: 1px solid black; padding: 2px;">2</span> <span style="border: 1px solid black; padding: 2px;">3</span> To (MM/DD) <span style="border: 1px solid black; padding: 2px;">8</span> <span style="border: 1px solid black; padding: 2px;">7</span>				
<b>Part I - Employee Information</b>					
<b>3</b> TIN <span style="border: 1px solid black; padding: 2px;">639</span> <span style="border: 1px solid black; padding: 2px;">228</span> <span style="border: 1px solid black; padding: 2px;">721</span> <span style="border: 1px solid black; padding: 2px;">000</span>	<b>A. NON-TAXABLE/EXEMPT COMPENSATION INCOME</b> Amount				
<b>4</b> Employee's Name (Last Name, First Name, Middle Name) <span style="border: 1px solid black; padding: 2px;">Cubar, Cheska Marie Rodriguez</span>	<b>5</b> RDO Code <span style="border: 1px solid black; padding: 2px;">081</span>				
<b>6</b> Registered Address <span style="border: 1px solid black; padding: 2px;">A. Borromeo St., Cebu City</span>	<b>6A</b> Zip Code <span style="border: 1px solid black; padding: 2px;"></span>				
<b>6B</b> Local Home Address <span style="border: 1px solid black; padding: 2px;"></span>	<b>6C</b> Zip Code <span style="border: 1px solid black; padding: 2px;"></span>				
<b>6D</b> Foreign Address <span style="border: 1px solid black; padding: 2px;"></span>	<b>27</b> Basic Salary (including the exempt P250,000 & below) or the Statutory Minimum Wage of the MWE <span style="border: 1px solid black; padding: 2px;"></span>				
<b>7</b> Date of Birth (MM/DD/YYYY) <span style="border: 1px solid black; padding: 2px;">12</span> <span style="border: 1px solid black; padding: 2px;">7</span> <span style="border: 1px solid black; padding: 2px;">2001</span>	<b>28</b> Holiday Pay (MWE) <span style="border: 1px solid black; padding: 2px;"></span>				
<b>8</b> Contact Number <span style="border: 1px solid black; padding: 2px;"></span>	<b>29</b> Overtime Pay (MWE) <span style="border: 1px solid black; padding: 2px;"></span>				
<b>9</b> Statutory Minimum Wage rate per day <span style="border: 1px solid black; padding: 2px;"></span>	<b>30</b> Night Shift Differential (MWE) <span style="border: 1px solid black; padding: 2px;"></span>				
<b>10</b> Statutory Minimum Wage rate per month <span style="border: 1px solid black; padding: 2px;"></span>	<b>31</b> Hazard Pay (MWE) <span style="border: 1px solid black; padding: 2px;"></span>				
<b>11</b> <input type="checkbox"/> Minimum Wage Earner whose compensation is exempt from withholding tax and not subject to income tax	<b>32</b> 13th Month Pay and Other Benefits (maximum of P90,000) <span style="border: 1px solid black; padding: 2px;">6,166.67</span>				
<b>12</b> TIN <span style="border: 1px solid black; padding: 2px;">007</span> <span style="border: 1px solid black; padding: 2px;">964</span> <span style="border: 1px solid black; padding: 2px;">541</span> <span style="border: 1px solid black; padding: 2px;">000</span>	<b>33</b> De Minimis Benefits <span style="border: 1px solid black; padding: 2px;">12,000.00</span>				
<b>13</b> Employer's Name <span style="border: 1px solid black; padding: 2px;">VCUSTOMER PHILIPPINES (CEBU), INC.</span>	<b>34</b> SSS, GSIS, PHIC & Pag-ibig contributions and Union Dues (Employee share only) <span style="border: 1px solid black; padding: 2px;">7,695.00</span>				
<b>14</b> Registered Address <span style="border: 1px solid black; padding: 2px;">4F JESA IT Center 90 General Maxilom Avenue Cogon Ramos, Cebu City</span>	<b>35</b> Salaries & Other Forms of Compensation <span style="border: 1px solid black; padding: 2px;">15,253.57</span>				
<b>14A</b> Zip Code <span style="border: 1px solid black; padding: 2px;">6000</span>	<b>36</b> Total Non-Taxable/Exempt compensation Income (Sum of Items 27 to 35) <span style="border: 1px solid black; padding: 2px;">41,115.24</span>				
<b>15</b> Type of Employer <input checked="" type="checkbox"/> Main Employer <input type="checkbox"/> Secondary Employer	<b>B. TAXABLE COMPENSATION INCOME REGULAR</b>				
<b>16</b> TIN <span style="border: 1px solid black; padding: 2px;"></span>	<b>37</b> Basic Salary <span style="border: 1px solid black; padding: 2px;">77,642.74</span>				
<b>17</b> Employer's Name <span style="border: 1px solid black; padding: 2px;"></span>	<b>38</b> Representation <span style="border: 1px solid black; padding: 2px;"></span>				
<b>18</b> Registered Address <span style="border: 1px solid black; padding: 2px;"></span>	<b>39</b> Transportation <span style="border: 1px solid black; padding: 2px;"></span>				
<b>18A</b> Zip Code <span style="border: 1px solid black; padding: 2px;"></span>	<b>40</b> Cost of Living Allowance (COLA) <span style="border: 1px solid black; padding: 2px;"></span>				
<b>19</b> Gross Compensation Income from Present Employer (Sum of Items 36 and 50) <span style="border: 1px solid black; padding: 2px;">118,757.98</span>	<b>41</b> Fixed Housing Allowance <span style="border: 1px solid black; padding: 2px;"></span>				
<b>20</b> Less: Total Non-Taxable/Exempt compensation Income from Present Employer (From Item 36) <span style="border: 1px solid black; padding: 2px;">41,115.24</span>	<b>42</b> Others (Specify) <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;"><b>42A</b></td> <td style="border: 1px solid black; padding: 2px;"></td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;"><b>42B</b></td> <td style="border: 1px solid black; padding: 2px;"></td> </tr> </table>	<b>42A</b>		<b>42B</b>	
<b>42A</b>					
<b>42B</b>					
<b>21</b> Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 50) <span style="border: 1px solid black; padding: 2px;">77,642.74</span>	<b>43</b> Commission <span style="border: 1px solid black; padding: 2px;"></span>				
<b>22</b> Add: Taxable Compensation Income from Previous Employer <span style="border: 1px solid black; padding: 2px;">-</span>	<b>44</b> Profit Sharing <span style="border: 1px solid black; padding: 2px;"></span>				
<b>23</b> Gross Taxable Compensation Income (Sum of Items 21 and 22) <span style="border: 1px solid black; padding: 2px;">77,642.74</span>	<b>45</b> Fees Including Director's Fees <span style="border: 1px solid black; padding: 2px;"></span>				
<b>24</b> Tax Due <span style="border: 1px solid black; padding: 2px;">-</span>	<b>46</b> Taxable 13th Month Pay <span style="border: 1px solid black; padding: 2px;">-</span>				
<b>25</b> Amount of Taxes Withheld <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;"><b>25A</b> Present Employer</td> <td style="border: 1px solid black; padding: 2px;">-</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;"><b>25B</b> Previous Employer</td> <td style="border: 1px solid black; padding: 2px;">-</td> </tr> </table>	<b>25A</b> Present Employer	-	<b>25B</b> Previous Employer	-	<b>47</b> Hazard Pay <span style="border: 1px solid black; padding: 2px;"></span>
<b>25A</b> Present Employer	-				
<b>25B</b> Previous Employer	-				
<b>26</b> Total Amount of Taxes Withheld As Ac Sum of Items 25A and 25B) <span style="border: 1px solid black; padding: 2px;">-</span>	<b>48</b> Overtime Pay <span style="border: 1px solid black; padding: 2px;"></span>				
<b>27</b> <span style="border: 1px solid black; padding: 2px;"></span>	<b>49</b> Others (Specify) <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;"><b>49A</b></td> <td style="border: 1px solid black; padding: 2px;">SL CONVERSION</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;"><b>49B</b></td> <td style="border: 1px solid black; padding: 2px;">VL CONVERSION</td> </tr> </table>	<b>49A</b>	SL CONVERSION	<b>49B</b>	VL CONVERSION
<b>49A</b>	SL CONVERSION				
<b>49B</b>	VL CONVERSION				
<b>28</b> <span style="border: 1px solid black; padding: 2px;"></span>	<b>50</b> Total Taxable Compensation Income (Sum of Items 37 to 49B) <span style="border: 1px solid black; padding: 2px;">77,642.74</span>				

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 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.

<b>51</b> <span style="border: 1px solid black; padding: 2px;">MORRIS F. QUILONDRINO</span> Present Employer/ Authorized Agent Signature Over Printed Name	Date Signed <span style="border: 1px solid black; padding: 2px;"></span>
<b>CONFORME:</b> <b>52</b> <span style="border: 1px solid black; padding: 2px;">Cubar, Cheska Marie Rodriguez</span> Employee Signature Over Printed Name	Date Signed <span style="border: 1px solid black; padding: 2px;"></span>
CTC No. / Valid ID of Employee <span style="border: 1px solid black; padding: 2px;"></span>	Date Signed <span style="border: 1px solid black; padding: 2px;"></span>
Place of Issue <span style="border: 1px solid black; padding: 2px;"></span>	Amount Paid, if CTC <span style="border: 1px solid black; padding: 2px;"></span>

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.	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 No. 3-2002, as amended.
<b>53</b> <span style="border: 1px solid black; padding: 2px;">MORRIS F. QUILONDRINO</span> Present Employer/ Authorized Agent Signature Over Printed Name (Head of Accounting/ Human Resource or Authorized Representative)	<b>59</b> <span style="border: 1px solid black; padding: 2px;">Cubar, Cheska Marie Rodriguez</span> Employee Signature Over Printed Name

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