

Certificate of Compensation
Payment / Tax Withheld

2316

For Compensation Payment With or Without Tax Withheld

July 2008 (ENCS) 3383

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

1 For the Year (YYYY) 2018	2 For the Period From (MM/DD) 01 01 To (MM/DD) 12 31
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Part I Employee Information	Part IV-B Details of Compensation Income and Tax Withheld from Present Employer
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3 Taxpayer Identification No. 730 019 398 0000	
4 Employee's Name (Last Name, First Name, Middle Name) 5 RDO Code MENDOZA,FRANCES ALFANTE 1 2 3	
6 Registered Address 6A Zip Code TIPOLO MANDAUE CITY CEBU	
6B Local Home Address 6C Zip Code TIPOLO MANDAUE CITY CEBU	
6D Foreign Address 6E Zip Code	
7 Date of Birth (MM/DD/YYYY) 08 26 1999	8 Telephone Number
9 Exemption Status <input type="checkbox"/> Single <input type="checkbox"/> Married	
9A Is the wife claiming the additional exemption for qualified dependent children? <input type="checkbox"/> Yes <input type="checkbox"/> No	
10 Name of Qualified Dependent Children	11 Date of Birth (MM/DD/YYYY)
12 Statutory Minimum Wage rate per day 12 386.00	
13 Statutory Minimum Wage rate per month 13 10,068.17	
14 <input checked="" type="checkbox"/> 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. 000 067 409 000	
16 Employer's Name CEBU MITSUMI, INC.	
17 Registered Address 17A Zip Code MRI-SEZ, SABANG, DANAOCITY CEBU 6,004	
<input type="checkbox"/> Main Employer <input type="checkbox"/> Secondary Employer	

Part III Employer Information (Previous)	
18 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)	68,706.18
22 Less: Total Non-Taxable/Exempt (Item 41)	68,706.18
23 Taxable Compensation Income from Present Employer (Item 55)	0.00
24 Add: Taxable Compensation Income from Previous Employer	
25 Gross Taxable Compensation Income	0.00
26 Less: Total Exemptions	
27 Less: Premium Paid on Health and/or Hospital Insurance (if applicable)	
28 Net Taxable Compensation Income	0.00
29 Tax Due	0.00
30 Amount of Taxes Withheld	
30A Present Employer	0.00
30B Previous Employer	
31 Total Amount of Taxes Withheld As adjusted	

		Amount
A. NON-TAXABLE/EXEMPT COMPENSATION INCOME		
32 Basic Salary/ Statutory Minimum Wage Minimum Wage Earner (MWE)	32	44,097.89
33 Holiday Pay (MWE)	33	1,930.00
34 Overtime Pay (MWE)	34	12,872.54
35 Night Shift Differential (MWE)	35	1,900.16
36 Hazard Pay (MWE)	36	
37 13th Month Pay and Other Benefits	37	3,955.19
38 De Minimis Benefits	38	200.00
39 SSS, GSIS, PHIC & Pag-ibig Contributions, & Union Dues (Employee share only)	39	3,750.40
40 Salaries & Other Forms of Compensation	40	0.00
41 Total Non-Taxable/Exempt Compensation Income	41	68,706.18
B. TAXABLE COMPENSATION INCOME REGULAR		
42 Basic Salary	42	
43 Representation	43	
44 Transportation	44	
45 Cost of Living Allowance	45	
46 Fixed Housing Allowance	46	
47 Others (Specify)	47	
47A	47A	
47B	47B	
SUPPLEMENTARY		
48 Commission	48	
49 Profit Sharing	49	
50 Fees Including Director's Fees	50	
51 Taxable 13th Month Pay and Other Benefits	51	
52 Hazard Pay	52	
53 Overtime Pay	53	
54 Others (Specify)	54	
54A	54A	
54B	54B	
55 Total Taxable Compensation Income	55	