



Republika ng Pilipinas  
Kagawaran ng Pangangalaga  
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

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) **05 04**

**Part I Employee Information**

3 Taxpayer Identification No. **323 104 867 0000**

4 Employee's Name (Last Name, First Name, Middle Name) **SALISE JEANNYME OTIDA** 5 RDO Code

6 Registered Address **2161 REGLA ST. MABOLO CEBU CITY** 6A Zip Code **6000**

6B Local Home Address 6C Zip Code

6D Foreign Address 6E Zip Code

7 Date of Birth (MM/DD/YYYY) **08 23 1995** 8 Telephone Number **09166677403**

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 IV-B Details of Compensation Income and Tax Withheld from Present Employer**

Item	Description	Amount
<b>A. NON-TAXABLE/EXEMPT COMPENSATION INCOME</b>		
32	Basic Salary	32
	Statutory Minimum Wage	
	Minimum Wage Earner (MWE)	
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
		<b>4,700.52</b>
38	De Minimis Benefits	38
		<b>5,164.07</b>
39	SSS, GSIS, PHIC & Pag-ibig Contributions, & Union Dues (Employee share only)	39
		<b>2,904.32</b>
40	Salaries & Other Forms of Compensation	40
		<b>0.00</b>
41	Total Non-Taxable Exempt Compensation Income	41
		<b>12,768.91</b>

**Part II Employer Information (Present)**

15 Taxpayer Identification No. **244 963 876 0000**

16 Employer's Name **QUALFON PHILIPPINES, INC.**

17 Registered Address **Skyrise 3, Qualfon Bldg., IT Park, Apas, Cebu City** 17A Zip Code **6000**

18 Main Employer  Secondary Employer

**Part III Employer Information (Previous)**

18 Taxpayer Identification No.

19 Employer's Name

20 Registered Address 20A Zip Code

<b>B. TAXABLE COMPENSATION INCOME REGULAR</b>		
42	Basic Salary	42
		<b>53,425.04</b>
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

**Part IV-A Summary**

21	Gross Compensation Income from Present Employer (Item 41 plus Item 55)	21	<b>75,093.95</b>
22	Less: Total Non-Taxable Exempt (Item 41)	22	<b>12,768.91</b>
23	Taxable Compensation Income from Present Employer (Item 55)	23	<b>62,325.04</b>
24	Add: Taxable Compensation Income from Previous Employer	24	<b>0.00</b>
25	Gross Taxable Compensation Income	25	<b>62,325.04</b>
26	Less: Total Exemptions	26	<b>0.00</b>
27	Less: Premium Paid on Health and/or Hospital Insurance (if applicable)	27	
28	Net Taxable Compensation Income	28	<b>62,325.04</b>
29	Tax Due	29	<b>0.00</b>
30	Amount of Taxes Withheld		
30A	Present Employer	30A	<b>0.00</b>
30B	Previous Employer	30B	<b>0.00</b>
31	Total Amount of Taxes Withheld As adjusted	31	<b>0.00</b>

<b>SUPPLEMENTARY</b>		
48	Commission	48
49	Profit Sharing	49
50	Fees Including Director's Fees	50
51	Taxable 13th Month Pay and Other Benefits	51
		<b>8,900.00</b>
52	Hazard Pay	52
53	Overtime Pay	53
54	Others (Specify)	54
54A		54A
		<b>0.00</b>
54B		54B
55	Total Taxable Compensation Income	55
		<b>62,325.04</b>

We declare, under the penalties of perjury, that this certificate has been made in good faith, verified by 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.

56 **METHYL VANDER**  
Present Employer's Authorized Agent Signatures Over Printed Name

Date Signed **09 15 2018**

CONFORME  
JEANNYME OTIDA