

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 Period **2018**
From **01 01** (Month) **10 25** (Day)

Part I Employee Information

312	950	885	8000
Employee's First Name (Last Name) APAL, JOSHUA JAE DACER			
Employee's ID No. 081			
4A Zip Code			
4B Home Address			
4C Work Address			
Date of Birth (MM/DD/YYYY)		Identification Number	
5. Is the employee a national or naturalized citizen of the Philippines? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6. Name of Employer (Department/Division)		7. Name of Job (Position/Grade)	
8. Statutory Minimum Wage rate per hour			

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

12. Basic Salary	
13. Statutory Minimum Wage	
14. Holiday Pay	
15. Overtime Pay	
16. Night Shift Differential (NSD)	
17. Hazard Pay	
18. 13th Month Pay and Other Benefits	13,688.28
19. De Minimis Benefits	25,087.67
20. SSS, GSIS, PhilCA, Pag-IBIG Contributions, Mutual Fund (Employee Share Only)	9,116.24
21. Bonuses & Other Types of Compensation	0.00
22. Total Non-Taxable Compensation Income	47,892.19

Part II Employer Information (Present)

009	110	008	8000
Employer's Name VALUELABS PHILIPPINES, INC.			
47A Zip Code 6000			
47B Home Address 17TH FLOOR, CEBU FT TOWER 2 CEBU BUSINESS			

Part IV-B TAXABLE COMPENSATION INCOME

23. REGULAR	
24. Basic Salary	179,335.08
25. Hazard Pay	
26. Transportation	
27. Cost of Living Allowance	
28. Travel Allowance	
29. Others (Specify)	3,002.30
30. Total Taxable Compensation Income	182,337.38

Part III Employer Information (Previous)

Employer's Name			
47A Zip Code			
47B Home Address			

SUPPLEMENTARY

31. Commission	
32. Profit Sharing	
33. Employee Stock Ownership Plan (ESOP)	
34. Labor 1st, 2nd and 3rd Shift Differential	0.00
35. Hazard Pay	
36. Overtime Pay	
37. Others (Specify)	
38. Total Taxable Compensation Income	182,337.38

Part IV-A Summary

39. Total Compensation Income	230,229.57
40. Total Taxable Compensation Income	47,892.19
41. Total Taxable Compensation Income	182,337.38
42. Compensation Exempt from Tax	182,337.38
43. Tax Due	0.00
44. Total Taxable Compensation Income	182,337.38
45. Total Taxable Compensation Income	0.00
46. Total Taxable Compensation Income	0.00

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 **JACKIE LOU BINOYA**
Present Employer/Authorized Agent Signature Over Printed Name
Date Signed: _____

CONFORME: **JOSHUA JAE DACER APAL**
Employee Signature Over Printed Name
Date Signed: _____

CTC No. _____
Employee Signature Over Printed Name
Date of Issue: _____

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 **JACKIE LOU BINOYA**
Present Employer/Authorized Agent Signature Over Printed Name
(Head of Accounting/ Human Resource or Authorized Representative)

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 Philippines 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 RRR No. 3-2002, as amended.

59 **JOSHUA JAE DACER APAL**
Employee Signature Over Printed Name