



Certificate of Compensation Payment/Tax Withheld

For Compensation Payment With or Without Tax Withheld

2018		From (MM/YY) 01 01		To (MM/YY) 09 02	
Part I Employee Information			Part IV-B Details of Compensation Income and Tax Withheld from Present Employer		
317 950 880 000 SAGRADO, IVY NICOLE CAWAY C/O SYKES ASIA INC. 68 Local Home Address 60 Foreign Address 7 Date of Birth (MM/DD/YYYY) 10/12/1989 9 Exemption Status: <input type="checkbox"/> Single <input type="checkbox"/> Married 9A Is the wife/relative of a dependent or qualified dependent children? 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 <input type="checkbox"/> Minimum Wage Earner whose compensation is exempt from withholding tax and not subject to income tax			A. Non-Taxable/Exempt Compensation Income 32 Basic Salary/ Statutory Minimum Wage/ Minimum Wage Earner (MWE) 32 0.00 33 Holiday Pay (MWE) 33 0.00 34 Overtime Pay (MWE) 34 0.00 35 Night Shift Differential (MWE) 35 0.00 36 Hazard Pay (MWE) 36 0.00 37 13th Month Pay and Other Benefits 37 7,257.35 38 De Minimis Benefits 38 0.00 39 SSS, GSIS, PHIC & Pag-Ibig Contributions, & Union Dues (Employee Share Only) 39 6,700.33 40 Salaries & Other Forms of Compensation 40 23,539.60 41 Total Non-Taxable/Exempt Compensation Income 41 37,497.28		
Part II Employer Information (Present)			B. TAXABLE COMPENSATION INCOME REGULAR		
15 Employer Identification No. 005 057 181 000 16 Employer's Name: SYKES ASIA, INC. 17 Registered Address: 10F, Glorietta 1 Corporate Center, Hotel Drive, Ayala Center Makati City 17A Zip Code <input type="checkbox"/> Main Employer <input type="checkbox"/> Secondary Employer			42 Basic Salary 42 80,387.90 43 Representation 43 0.00 44 Transportation 44 0.00 45 Cost of Living Allowance 45 0.00 46 Fixed Housing Allowance 46 0.00 47 Others (Specify) 47A 47B SUPPLEMENTARY 48 Commission 48 0.00 49 Profit Sharing 49 0.00 50 Fees including Director's Fees 50 0.00 51 Taxable 13th Month Pay and Other Benefits 51 0.00 52 Hazard Pay 52 0.00 53 Overtime Pay 53 0.00 54 Others (Specify) 54A Salaries & Other Forms of Compensation 54A 71,934.47 54B 55 Total Taxable Compensation Income 55 152,322.37		
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)		21	189,819.65		
22 Less: Total Non-Taxable/Exempt (Item 41)		22	37,497.28		
23 Taxable Compensation Income from Present Employer (Item 55)		23	152,322.37		
24 Add: Taxable Compensation Income from Previous Employers		24	0.00		
25 Gross Taxable Compensation Income		25	152,322.37		
26 Less: Total Exemptions		26	0.00		
27 Less: Premiums Paid on Health and/or Hospital Insurance (if applicable)		27	0.00		
28 Net Taxable Compensation Income		28	152,322.37		
29 Tax Due		29	0.00		
30 Amount of Taxes Withheld					
30A Present Employer		30A	0.00		
30B Previous Employers		30B	0.00		
31 Total Amount of Taxes Withheld As Adjusted		31	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.

58 NOEL B. VALDEZ
Senior Payroll Manager
Date Signed _____
CONFORME Present Employer/Authorized Agent Signature Over Printed Name