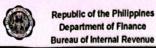
BDO	Check Transaction Slip	Currency Peso US Dollar Others	Date 10/16/24
Deposits Account Name	lepositor's collecting agent, assuming no responsibility	Local On-us MC/DD	Others
Current Savings Account No. Time Deposit/ Placement Payor's Name	into the possission of the Bank, the rectangle of the control of t	Use separate slip(s) for each type of transaction Bank/Branch Check No.	Amount
with Deposit Reference Facility	ositor assumes full responsibility for the Corectnest of	2000000 [3]	184,339-29
[2019년 1일	reigh Currenty Checks), the Depositor agrees to be b	nd thich cultency denominated checks ("Fo	a reliable of tally on disklar
rency. Chems a redirecture to the continue to or hereby waives the presentation for payment.	able electronic check continuous stedingdus Foreign Curlesmed incorporated herein by reference. The Deposite	PATIMENT FOR SO3/0496 C	n#1184/1194)
	shall be kept by BDQ where it was presented or such	in her surges that the original of the check is a bego delivered for gurposes of presentme	The Donald Inches
Machine Validationrrent Acct. Cheque Univ Debo	inas check whall be disagged to 1841 1841 as the Correction of the Foreign in other pariod as may the provided under the Foreign reby knowingly, un 25, 256, 1841, 1841 Apack About release	stor acknowledges and agrees that the original succession that of presenting it or succession to be possion for	of the per Corner of the
PHILCEMENT CORPORATION STUDIES OF SHARE	im, cause of action the other Despring the properties in the cause of action the contract of the cause of the cause of action	romactions contemplated herewith.	e officers are provided in the Agriculture of the A
Date :16 Oct 2024 16-10-24 14	ORT TRADING CORED Ref Fee: 0.00 and emblored in the control of the	ik en accordance with applicable lays, rules	Eine Bank allo reserve Edinposed of by the Ba
Override ID :619 619		the deposit	184,339.29
490: ROCKWELL CENTER - MAKATI This serves as your receipt v	Host accepted when machine validated.		V062019



For BIR BCS/ Use Only Item:



2307 Certific

Certificate of Creditable Tax Withheld at Source

1	2307 01/18ENCS

January 2018 (ENCS)		Withhel	d at Sourc	е			2307 01/18ENCS
Fill in all applicable spaces. Mark all appropri	ate boxes wit	h an "X".			-	-	
1 For the Period From 10	01 2	024 I (MWC	00/11/1	To 10	31	2024	(MM/DDYYYY)
		Part I -	Payee Information		_		
2 Taxpayer Identification Number (TIN)		909 - 828	THE RESERVE OF THE PARTY OF THE	000			
3 Payee's Name (Last Name, First Name,	Middle Name	e for Individual OR Reg	istered Name for Non-	Individual)			
PHILCEMENT CORPORA	TION						45 710 0-45
4 Registered Address							4A ZIP Code
Garcia Rd. Mariveles Divers	sion Road	Mariveles, Bata	an		ALC: NO.		
5 Foreign Address, if applicable							
		Part II -	Payor Information				
6 Taxpayer Identification Number (TIN)		909 - 534	LOCAL CONTRACTOR	000111			
7 Payor's Name (Last Name, First Name, N	Aiddle Name	for Individual OR Regis				NAME OF THE PARTY OF THE PARTY.	
STARPORT PH HOLDING	s, INC. (I	FORMERLY: ST	TARPORT TRA	DING COR	POI	RATION)	
8 Registered Address							8A ZIP Code
Room 301 Grace Building, C	Ortigas Av	venue, Greenhill	s, San Juan City				1/503
	Part III -	- Details of Monthly I	AMOUNT OF INC	OME PAYMENT	S		Tax Withheld for the
Income Payments Subject to Expanded Withholding Tax	ATC	1st Month of the Quarter	2nd Month of the Quarter	3rd Month of Quarter		Total	Quarter
Income payment made by top withholding agents to their local/resident supplier of goods other than those covered by other rates of withholding tax	WC158	166,071.43				166,071.43	1,660.71
MILLI DIGIT & COX					- V- HS-T		
					Level and		
		and the second s			-		
Total							1,660.7
Money Payments Subject to Withholding of Business Tax (Government & Private)							
Business Tax (Government & Private)			Upor a superior of the superio				
		The second secon					
					-		
	-		1000				
			A				
Total					1918		-
We declare under the penalties of perjury to pursuant to the provisions of the National Internation processing of our information as contemplated	al Revenue C	code, as amended, and	the regulations issued	under authority	there	or. Further, we give	I belief, is true and correct our consent to the
		JO)	R. TAHIL FISER 17510-5390-2	2000)			
Sig	nature over P	Printed Name of Payor/I	Payor's Authorized Re	presentative/Tax	x Age	nt	
Tax Agent Accreditation No./		Date of Is]		ate of Expiry	
Attorney's Roll No. (if applicable)	6 A 6 A 6 A 6 A 6 A 6 A 6 A 6 A 6 A 6 A	(MM/DD/Y)	YYY) L L L L		(M	IM/DD/YYYY)	
		GOI	II MISHIBI				
			T CORPORATION				
Sign	nature over Pi	rinted Name of Payee/F	Payee's Authorized Re Designation and TIN)	epresentative/Ta	x Agei	n e	100000000000000000000000000000000000000
Tax Agent Accreditation No.J	ie dans	Date of Is	sue			ite of Expiry	
*NOTE: The BIR Data Privacy is in the BIR we	bsite (www.bi	ir.gov.ph)	YYY) LILLI		(M	M/DD/YYYY)	