For BIR BCS/ Use Only Item:



Republic of the Philippines Department of Finance Bureau of Internal Revenue

2307

Certificate of Creditable Tax Withheld at Source



January 2018 (ENCS)							2307 01/18ENCS		
Fill in all applicable spaces. Mark a			Control of the land of the lan						
1 For the Period F	rom Op	01 20	72	POYYY	To 09 3	q 2024	(MM/DD/YYY)		
			Part I ~	Pavee Information		The second second			
2 Taxpayer Identification Number			001 - 4091	- 491	00000				
3 Payee's Name (Last Name, Fi	rst Name, Mic	ddle Name fo	or Individual OR Regi	stered Name for Non-Inc	dividual)				
SIGNIFY PHILIPPI	NES, INC								
4 Registered Address							4A ZIP Code		
9th Floor The Brillia	nce Cente	r 11th A	ve. 40th Ave Fo	ort Bonifacio Tag	uig City		1,634		
5 Foreign Address, if applicable									
			Part II -	Payor Information	A STREET OF THE STREET				
6 Taxpayer Identification Number	r (TIN)		0061 - 5341	- 2111 -	000				
7 Payor's Name (Last Name, Fit	st Name, Mid								
STARPORT PH HO	LDINGS,	INC. (F	ORMERLY: S'	TARPORT TRAI	DING CORPO	RATION)			
8 Registered Address							8A ZIP Code		
Room 301 Grace Bu	ilding, Or	tigas Ave	enue. Greenhill	s. San Juan City					
				Income Payments and	d Taxes Withheld	Newson State of the National Action			
Income Payments Subject to I	Expanded		And in the second of the second		OME PAYMENTS		Tax Withheld for the		
Withholding Tax		ATC	1st Month of the Quarter	2nd Month of the Quarter	3rd Month of the Quarter	Total	Quarter		
ncome payment made by top with agents to their local/resident suppli other than those covered by other withholding tax	er of goods	WC158			6,835,229.8	8 6,835,229.88	68,352.30		
									
			1000						
Total				Salar Sa		6,835,229.88	68,352.30		
Money Payments Subject to Wit Business Tax (Government 8									
				-					
Fotal				-					
			701000000000000000000000000000000000000						
We declare under the penaltie bursuant to the provisions of the N processing of our information as co	ational Interna	Revenue C	code, as amended, a	nd the regulations issued	d under authority there	eof. Further, we give ou			
			(General Ma	A AMITON 1997 720-094-603-000	00)				
	Sig	nature over	Printed Name of Pa	yor/Payor's Authorized Fi	Representative/Tax A	gent			
Tax Agent Accreditation No./			Date	of lesue		Date of Expiry			
Attorney's Roll No. (if applicable)		750		CONFORME:		(MWDDYYYY)			
				Y PHILIPPINES, INC.		2 N 10 15			
	Sig	nature over	Printed Name of Pay	ree/Payee's Authorized		Agent			
Tax Agent Accreditation No./		The same of		itle/Designation and TIN	1	Date of Expiry	No. 200 at November 1990		
I GA AUGIR ACCIEURGROUI IVO.			THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO I	DYYYY		(MM/DD/YYYY)			