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Republic of the Philippines For BIR BCS/ Department of Finance Use Only Item: Bureau of Internal Revenue BIR Form No. **Certificate of Creditable Tax** 2307 Withheld at Source January 2018 (ENCS) Fill in all applicable spaces. Mark all appropriate boxes with an "X". (MM/DDYYYYY) 09 30 2024 For the Period (MM/DD/YYYY) 09 01 2024 Part I - Pavee Information 2 Taxpayer Identification Number (TIN) - 8711 - 7181 - 0000 136 3 Payee's Name (Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual) RICSAN SECURITY AGENCY 4A ZIP Code Registered Address Florenceville Subd., Pahanocoy, Bacolod City Foreign Address, if applicable Part II - Payor Information 6 Taxpayer Identification Number (TIN) - 296 909 210 - 000 Payor's Name (Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual) TOP ARMADA CEMENT CORPORATION Registered Address 8A ZIP Code Unit 311 AIC Burgundy Empire Tower, ADB Avenue, Ortigas Center, Brgy. San Antonio, Pasig 1605 Part III - Details of Monthly Income Payments and Taxes Withheld AMOUNT OF INCOME PAYMENTS Income Payments Subject to Expanded Tax Withheld for the 1st Month of the 2nd Month of the 3rd Month of the Withholding Tax ATC Total Quarter Quarter Quarter Quarter Income payment made by top withholding agents to their local/resident supplier of 3,908.50 services other than those covered by other 3,908.50 78 17 WC160 rates of withholding tax 78.17 Money Payments Subject to Withholding of Business Tax (Government & Private) Total

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. Further, we give our consent to the processing of our information as contemplated under the "Data Privacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes. JOY (COMPLIANCE OFFICER / 7510-5390-2000) Signature over Printed Name of Payor/Flayor's Authorized Representative/Tax Agent (Indicate Title/Design ation and TIN) Tax Agent Accreditation No./ Date of Expiry Date of Issue Attorney's Roll No. (if applicable) (MM/DD/YYYY) (MM/DD/YYYY) CONFORME: RICSAN SECURITY AGENCY Signature over Printed Name of Payee/Payee's Authorized Representative/Tax Agent (Indicate Title/Designation and TIN) Tax Agent Accreditation No./ Date of Issue **Date of Expiry** (MM/DD/YYYY) Attorney's Roll No. (if applicable) (MM/DD/YYYY)

*NOTE: The BIR Data Privacy is in the BIR website (www.bir.gov.ph)

