

**PNB****DEPOSIT SLIP**

DATE:

08/29/24
M M D D Y Y

Account Name:

Ricsan Security Agency

Account No.

3 0 8 1 7 0 0 0 0 9 3 3

Online

Pasig-Ortigas Garnet BRANCH is happy to serve you
You have made a ON-US CHECK DEPOSIT
of PHP 22,921.84 on 08-29-2024 13:30:42
From/to 123370006585 Chk#2000000492
308170000933 RICSAN SECURITY AGENCY

Service Charge: PHP 0.00

Processed by PUNIO, RIA JOY O. Seq# 282 apaomm

Thank you for banking with us. With PNB. You First !

PAYMENT FOR SECURITY FOR
UNIT 16-31, 2024 (TOP ARMADA)

Before leaving the counter, please ensure the correctness of the transaction details as seen on the validation. This document is considered valid when machine validated.

Currency: ☒ P ☐ \$ ☐ Others☐ CASH (For FX Deposit, please fill-out cash breakdown at the back)

NOTES	QTY	AMOUNT	NOTES	QTY	AMOUNT
1,000			100		
500			50		
200			20		
TOTAL COINS			TOTAL CASH DEPOSIT		

☒ CHECK

NO. OF CHECKS (max. of 10)

TOTAL CHECK DEPOSIT

P 22,921.84

If you are not the account holder, please provide the information below.

Name: JONA ZHEN V. CALABRIA

Contact No.: 09156760043 Relationship: Employee

Purpose: Deposit Citizenship: Filipino

Valid ID: Signature:

☒ I/We consent to the collection and processing of personal data provided herein that will be used for facilitating the deposit transaction. All personal data will be processed in accordance with the Bank's Data Privacy Policy provided in the Bank's website (www.pnb.com.ph) and applicable data privacy laws, rules and regulations as may be amended from time to time.

JONA ZHEN V. CALABRIA

Depositor's Signature

Approved by:

CLIENT'S COPY

CA004.3 Sept '21

BIR Form No.

2307

January 2018 (ENCS)

Certificate of Creditable Tax Withheld at Source



2307 01/18ENC5

Fill in all applicable spaces. Mark all appropriate boxes with an "X"

1	For the Period	From	08	01	2024	(MM/DD/YYYY)	To	08	31	2024	(MM/DD/YYYY)
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Part I – Payee Information

2 Taxpayer Identification Number (TIN) 0001 - 8561 - 3981 - 0021

3 Payee's Name (Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual)

RICSAN SECURITY AGENCY

4 Registered Address

Florenceville Subd., Pahanocoy, Bacolod City

4A ZIP Code

5 Foreign Address, if applicable

Part II – Payer Information

6 Taxpayer Identification Number (TIN)	009	-	210	-	296	-	000			
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7 Payor's Name (Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual)

TOP ARMADA CEMENT CORPORATION

8 Registered Address

Unit 311 AIC Burgundy Empire Tower, ADB Avenue, Ortigas Center, Brgy. San Antonio, Pasig City

8A ZIP Code

1.605

Part III – Details of Monthly Income Payments and Taxes Withheld

Income Payments Subject to Expanded Withholding Tax	ATC	AMOUNT OF INCOME PAYMENTS				Tax Withheld for the Quarter
		1st Month of the Quarter	2nd Month of the Quarter	3rd Month of the Quarter	Total	
Income payment made by top withholding agents to their local/resident supplier of goods other than those covered by other rates of withholding tax	WC160		3,908.50		3,908.50	78.17
Total						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 (RA No. 10173) for legitimate and lawful purposes.

JOY R. TAMIL

(COMPLIANCE OFFICER / 7510-5390-2000)

Signature over Printed Name of Payor/Payor's Authorized Representative/Tax Agent

(Indicate Title/Designation and TIN)

Tax Agent Accreditation No./
Attorney's Roll No. (if applicable)

Date of Issue
(MM/DD/YYYY)Date of Expiry
(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./
Attorney's Roll No. (if applicable)

Date of Issue
(MM/DD/YYYY)Date of Expiry
(MM/DD/YYYY)

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