| **IN PAYMENT OF:** | | **NAME OF COMPANY**  **COMPANY ADDRESS**  **VAT REG. TIN: XXX-XXX-XXX**  **OFFICIAL RECEIPT No.:**  (Type of industry)  Date:\_\_\_\_\_\_\_ 20,\_\_\_\_  Received from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ with TIN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  and address at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ engaged in  the business style of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the sum of  Pesos \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (P \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ )  in full/partial payment for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Check No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Bank: Authorized Signature  Cash  Accreditation No.:  Accreditation Date: |
| --- | --- | --- |
| **PARTICULARS** | **AMOUNT** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| TOTAL SALES |  |
| Add: VAT |  |
| Less: Withholding Tax |  |
| Amount Due |  |
|  |  |
| Vatable Sales |  |
| VAT-Exempt |  |
| VAT Zero Rated Sales |  |
| VAT Amount |  |
|  |  |
| **Form of Payment** | |
| ❏ **Cash** | ❏  **Payment** |

BIR ATP. No.:

Date issued: Valid until: \*THIS OFFICIAL RECEIPT SHALL BE VALID FOR FIVE (5) YEARS FROM THE DATE OF ATP\*

Non-VAT Reg. TIN: