

 Republika ng Pilipinas Kagawaran ng Pananalapi Kawanihan ng Rentas Internas		Payment Form		BIR Form No. 0605 September 2003(ENCS)																																				
1 For the <input checked="" type="radio"/> Calendar <input type="radio"/> Fiscal		3 Quarter <input checked="" type="radio"/> 1st <input type="radio"/> 2nd <input type="radio"/> 3rd <input type="radio"/> 4th		4 Due Date (MM/DD/YYYY) 01 31 2024																																				
2 Year Ended (MM/YYYY) 12 - December 2024				5 No. of Sheets Attached 0																																				
				6 ATC MC180																																				
7 Return Period (MM / DD / YYYY) 12 31 2024			8 Tax Type RF																																					
Part I Background Information																																								
9 Taxpayer Identification No. 009 810 222 000		10 RDO Code 53B		11 Taxpayer Classification <input type="radio"/> I <input checked="" type="radio"/> N																																				
				12 Line of Business/Occupation REAL STATE BUILDING																																				
13 Taxpayer's Name (Last Name, First Name, Middle Name for Individuals) / (Registered Name for Non-Individuals) EUREKA RESORTS, INC.				14 Telephone Number 09178065985																																				
15 Registered Address UNIT 212 COMMERCE CENTER FILINVEST ALABANG NCR, FOUR				16 Zip Code 1780																																				
17 Manner of Payment Voluntary Payment <input type="radio"/> Self-Assessment <input type="radio"/> Penalties <input type="radio"/> Tax Deposit/Advance Payment <input type="radio"/> Income Tax Second Installment(Individual) <input checked="" type="radio"/> Others(Specify) ANNUAL REGISTRATION FEE			18 Type of Payment <input type="radio"/> Preliminary/Final Assess/Deficiency Tax <input type="radio"/> Accounts Receivable/Delinquent Account <input type="radio"/> Installment <input type="radio"/> No. of Installment <input type="radio"/> Partial Payment <input checked="" type="radio"/> Full Payment																																					
Part II Computation of Tax																																								
19 Basic Tax/Deposit/Advance Payment 500.00																																								
20 Add: Penalties Surcharge Interest Compromise																																								
20A 0.00		20B 0.00		20C 0.00																																				
				20D 0.00																																				
21 Total Amount Payable(Sum of Items 19 & 20D) <input type="radio"/> Pre-approved by Investigating Office				21 500.00 <input type="radio"/> Not approved by Investigating Office																																				
For Voluntary Payment I declare, under the penalties of perjury, that this document has been made in good faith, verified by me, and to the best of my knowledge and belief, is true and correct, pursuant to the provisions of National Internal Revenue Code, as amended, and the regulations issued under authority thereof.			For Payment of Deficiency Taxes -- From Audit/Investigation/ Delinquent Account APPROVED BY:		Stamp of Receiving Office and Date of Receipt																																			
22A Signature over Printed Name of Taxpayer/Authorized Representative			22B Signature Over Printed Name of Head of Office																																					
Part III Details of Payment																																								
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Particulars</th> <th>Drawee Bank/Agency</th> <th>Number</th> <th>MM</th> <th>DD</th> <th>YYYY</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>23 Cash/Bank Debit Memo</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>23</td> </tr> <tr> <td>24 Check</td> <td>24A</td> <td>24B</td> <td>24C</td> <td></td> <td></td> <td>24D</td> </tr> <tr> <td>25 Tax Debit Memo</td> <td>25A</td> <td>25B</td> <td>25C</td> <td></td> <td></td> <td>25D</td> </tr> <tr> <td>26 Others</td> <td>26A</td> <td>26B</td> <td>26C</td> <td></td> <td></td> <td>26D</td> </tr> </tbody> </table>						Particulars	Drawee Bank/Agency	Number	MM	DD	YYYY	Amount	23 Cash/Bank Debit Memo						23	24 Check	24A	24B	24C			24D	25 Tax Debit Memo	25A	25B	25C			25D	26 Others	26A	26B	26C			26D
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Machine Validation/Revenue Official Receipt Details (If not filed with the bank)																																								
Taxpayer Classification: I - Individual N - Non-Individual																																								