



**SWORN STATEMENT OF GROSS RECEIPTS / SALES & EVALUATION FORM**

Pursuant to Ordinance No. SP-91, S- 1993 as amended, otherwise known as the Quezon City Revenue Code and Ordinance No. SP-2981 S-2020, on the collection / payment of business taxes, charges and fees for purposes of renewal of Business /Mayor's permits, it is hereby declared under oath, thus:

Name of Taxpayer / Company / Establishment: \_\_\_\_\_

Trade / Business Name: \_\_\_\_\_

Exact Business Address: \_\_\_\_\_

Category:  Partnership  Corporation  Single Proprietorship  Cooperative SEC/DTI/Bus. Reg. No. \_\_\_\_\_

KIND / NATURE OF BUSINESS	AREA ( In Sq. Meters )	MAYOR'S / BUSINESS PERMIT NO.	GROSS SALES / RECEIPTS ( In Pesos )	
			2019	2020

SUMMARY OF SALES PER VAT/PERCENTAGE TAX RETURN/ QUARTERLY INCOME TAX RETURNS	
2020	AMOUNT
1st Quarter	
2nd Quarter	
3rd Quarter	
4th Quarter	
October	
November	
December	
<b>TOTAL</b>	

CHECKLIST OF ORIGINAL DOCUMENTS TO BE PRESENTED TO DOCUMENTS VERIFIER IN THE FOLLOWING ORDER PRIOR TO EVALUATION: *Please mark ( ✓ )*

- 2020 Business / Mayor's Permit accompanied with Tax Bill and OR from the Treasurer's Office;
- 2020 Certified Breakdown of Sales, if more than one line of business and/or more than one Branch.
- 2020 VAT Returns / ITR / Percentage Tax Returns, whichever is applicable;
- 2020 Audited Financial Statement with proof of receipt of SEC/BIR/DTI, whichever is applicable; ( pursuant to Ordinance No. SP-2981 S-2020 );**
- 2019 Annual Income Tax Returns ( ITR ) with complete set of Audited Financial Statement, with proof of payment;
- Proof of Authority (Secretary's Certificate or SPA) of the company / establishment's representative.

I attest, under pain of perjury, to the truthfulness and correctness of the foregoing to the best of my personal knowledge and based on authentic documents and records ( i.e. Books of Accounts ).

\_\_\_\_\_  
( Signature Over Printed Name )

Date: \_\_\_\_\_ Contact No. \_\_\_\_\_

*SUBSCRIBED AND SWORN TO before me at Quezon City, Metro Manila on the date as herein indicated.*  
( Administering Officer )

**Note: DO NOT WRITE BELOW THIS PORTION \*\*\*\*\* RESERVED FOR THE EVALUATOR.**

TAX YEAR	NATURE OF BUSINESS	GROSS SALES / RECEIPTS ( pesos )	REMARKS / FINDINGS

Evaluated by: \_\_\_\_\_  
( Signature Over Printed Name )

Date of Evaluation: \_\_\_\_\_