Appendix 2 SUMMARY OF COLLECTIONS AND REMITTANCES - BT Date Barangay: City/Municipality: Zamboanga City SCR - BT No.: Deputized Collector: Province: Zamboanga Del Sur Page **Nature of Collections** OR No. Payor **Amount** CTC-Corp. Others CTC- Indv RPT Certification: Acknowledgment: I hereby acknowledge receipt of the certified SCR I hereby certify that the foregoing is the complete and correct record of all my collections for_ complete with duplicate copies of the ORs and the remittance

Signature over Printed Name

City/Municipal Treasurer

Date

Date

Barangay Treasurer
(For use by the BT as deputized by the City/Municipal Treasurer)

Duplicate copies of ORs and the remittance of _

Signature over Printed Name

are hereto attached.