



# Asia University

## Receipt

Date

<b>Name</b>		Personal ID.									
<b>Registered Address</b>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> (please fill in the postal code)										
Identity type	<input type="checkbox"/> non-member of school (health insurance not insured with university) <input type="checkbox"/> member of school (health insurance insured with university, except for spouse) <input checked="" type="checkbox"/> student <input type="checkbox"/> Others _____										
Total Amount	NTD										
Withhold supplemental premium											
Description											
<b>Signature</b>	※Taxpayer is one that resides in the Republic of China. From next year (2015) onwards, Withholding & Non-Withholding Tax Statement shall not be sent. It may be obtained by applying through the National Taxation Bureau or the Accounting Office of the university.										
Bank and branch name	bank	branch	【self's account number】								
Bank account number	【to be filled in】										
Remarks	※inter-bank transfer charges to be borne by payer										

Note: Personal particulars collected from this receipt are solely for the purpose of withholding tax reporting.