



FEDERAL REPUBLIC OF NIGERIA

NIGERIA SOCIAL INSURANCE TRUST FUND (NSITF)

(EMPLOYEES' COMPENSATION ACT, 2010)

EMPLOYEES' SCHEDULE OF PAYMENT

ADAPOST INTEGRATED SERVICES LTD. (ANY WRONG INFORMATION/DECLARATION IS AN OFFENCE AND IS PUNISHABLE UNDER SECTION 39, 40 AND 65 OF THE ECA 2010)

S/N	EMPLOYEE FIRST NAME	EMPLOYEE MIDDLE NAME	EMPLOYEE LAST NAME	EMPLOYEE ADDRESS	DATE OF BIRTH	GENDER	MARRITAL STATUS	EMPLOYEE ID	EMPLOYMENT DATE	EMPLOYEE EMAIL	JOB TITLE	STATE OF ORIGIN	L.G.A	TOWN	CONTACT PHONE NO.	ALTERNATE NUMBER	MEANS OF IDENTITY	MEANS ID ISSUED STATE	NEXT OF KIN	NO. OF DEPENDANTS	SALARY, MONTHLY
1	Ucheonye	Jami	Kadunye	Plot 1127, Gboko Ave, Onitsha	03/08/93	M	Married	004	Nov 2021	xtremjamy@gmail.com	Operations	Imo	Ideato North	Obado Ukwu	08137 5688 79		Int'l passport	Abuja	Joy wife	3	30,000
2	Toshun	Chibuke		Plot 1127, Gboko Ave, Onitsha	05/08/88	M	Married	006	Sept 2021	xtremjamy@gmail.com	HR	Imo	Ideato North	Obado Ukwu	08137 5688 79		Int'l passport	Abuja	Osajiye Cynthia	2	30,000
3																					
4																					
5																					
6	Hawwa	Abdul	Lahi	Plot 1127, Gboko Ave, Onitsha	11/2/80	F	Married	008	October 2021	xtremjamy@gmail.com	Account	Kano	Kano	Kano	08137 5688 79		Int'l passport	Abuja	Abdullahi	3	30,000
7																					
8																					
9																					
10																					

THIS FORM SHOULD BE DULY COMPLETED AND SUBMITTED BY THE EMPLOYER TO REFLECT THE ESTIMATE OF EARNINGS OF THE EMPLOYEES. THIS FORM SHOULD BE COMPLETED ANYTIME PAYMENT IS MADE.

AUTHORISED SIGNATORY

Jami

NAME OF OFFICER

Ucheonye Kadunye

POSITION

Operations Manager



FEDERAL REPUBLIC OF NIGERIA
NIGERIA SOCIAL INSURANCE TRUST FUND (NSITF)
(Employees' Compensation Act, 2010)

ECS.RE01

Registration of Employer
Section 39(1)

Mark 'X' as Appropriate

Public/Private Companies [] Informal Sector Employer [] Partnership []

Sole Proprietorship [] Others (please specify) []

PART 1: PARTICULARS OF BUSINESS (for MDAs, public and private companies):

1.1 Employer Name: Adapost Integrated Services Ltd.

1.2 Incorporation Number: RC 1850296 1.3 Address: Street Number: Plot 1127

Street Name: 6th Avenue City: Owerri

Local Govt: Amac State: Fct Abuja

1.4 Postal Address:

1.5 Tel Number: 08137568879 1.6 Fax Number:

1.7 Email: Xtremjamy@gmail.com

1.8 Does Employer operate in other locations? Yes [] No []. 1.9 If yes give details:

1.10 If yes in 1.9, do you intend to pay contribution centrally? Yes [] No [].

1.11 Did business start prior to the Act? Yes [] No []

PART 2: PARTICULARS OF OWNER(S) OF ORGANIZATION (for Partnership & Sole Proprietorship):

2.1 Surname: Ongyegiri Middle Name: Jamike

First Name: Uche Position: Managing Director

Tel. Number: 08137568879 Mode of identification: National I.D. [] or Drivers Licence [] or

International Passport [] Specify ID. Number:

PART 3: BUSINESS SECTOR CATEGORIES:

Construction ☐ Mining ☐ Banking & Finance ☐ Manufacturing ☐ Aviation ☐

MDAs ☐ Oil & Gas ☐ Agriculture ☐ Energy ☐ Telecom ☐ Others (please specify):

General contractor

PART 4: DECLARATION BY EMPLOYER OR AUTHORISED PERSON:

I certify that the above particulars are correct

Signature or Thumb Print: Jamike Position: Managing Director Date: 26/04/2022

Surname: Ongyegiri First Name: Uche Official Stamp (if any):

