

Employee Name	Employee Address	DOB	Gender	Marital Status	Employee ID	Employee Email	Job Title	State of Origin	Local Government Area	Town	Contact Phone	Alter Means of Identity	Means of Identity Number	Identity Issue State	Next of Kin	Next of Kin Number	NO of Dependents	Monthly Remuneration
ANKABURO	ANKABURO, KANO STATE	04/05/99	M	Married	013 01	016/12/14	Bridge Engineer	QO	ANKABURA	ANKABURA	0818171736	NIM	NIM	ANKABURA	ANKABURA	ANKABURA	2	90,000
DOMINIC	ANKABURO, KANO STATE	04/05/99	M	Married	013 01	016/12/14	Bridge Engineer	QO	ANKABURA	ANKABURA	0818171736	NIM	NIM	ANKABURA	ANKABURA	ANKABURA	2	90,000
THARABO	ANKABURO, KANO STATE	04/05/99	M	Married	013 01	016/12/14	Bridge Engineer	QO	ANKABURA	ANKABURA	0818171736	NIM	NIM	ANKABURA	ANKABURA	ANKABURA	2	90,000
JOCELIN	ANKABURO, KANO STATE	04/05/99	M	Married	013 01	016/12/14	Bridge Engineer	QO	ANKABURA	ANKABURA	0818171736	NIM	NIM	ANKABURA	ANKABURA	ANKABURA	2	90,000
ESTHER	ANKABURO, KANO STATE	04/05/99	M	Married	013 01	016/12/14	Bridge Engineer	QO	ANKABURA	ANKABURA	0818171736	NIM	NIM	ANKABURA	ANKABURA	ANKABURA	2	90,000

from January 2020 - December 2023
= 48 months 190 = 9000 x 48
= 432,000

NSITF KAGANI BRANCH
ACCOUNT UNIT
CHECKED
Name: ...
Signature: ...
Date: 20/10/2023

#90,000

JAN 2020 - DEC 2023

Section 39(1)

NIGERIA SOCIAL INSURANCE TRUST FUND (NSITF)

Sole Proprietorship [] Others (please specify) []

1.1 Employer Name: ~~BR 15/15012 LMS CORP 02-17-57/189/13/1350005~~

Street Name: 3000 N. 10th St. City: Phoenix

State: NY Local Govt: Albany

[illegible]

[illegible]

17. EMAIL: [redacted]

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: <u>AKHAR/NOO</u>										Middle Name: <u>AK</u>									
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First Name: 10/10/10 Position: 10/10/10

Tel. Number: [] [] [] [] [] [] [] [] [] []

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

[illegible]

PART 3: BUSINESS SECTOR CATEGORIES:

Construction ☐ Mining ☐ Banking & Finance ☐ Manufacturing ☐ Aviation ☐ MDAs ☐ Oil & Gas ☐ Agriculture ☐ Energy ☐ Telecom ☐ Others (please specify): ☐

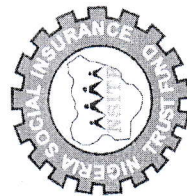
PART 4: DECLARATION BY EMPLOYER OR AUTHORIZED PERSON:

I certify that the above particulars are correct

Signature or Thumb Print: [Signature] Position: HRD Date: 28/10/2023

Surname: W. J. H. B. J. C. First Name: W. J. H. B. J. C. Official Stamp (if any):

Tel: +234-9-2911810; +234-9-2911811; email: info@nsiff.gov.ng; website: www.nsiff.gov.ng



FEDERAL REPUBLIC OF NIGERIA
NIGERIA SOCIAL INSURANCE TRUST FUND (NSITF)
(Employees' Compensation Act, 2010)
Employer's Schedule of Payments

(Any wrong information/declaration is an offence and is punishable under Sections 39, 40 and 65 of the ECA 2010).

BRIDGE BUILDERS CORPORATE SERVICES LIMITED							Remarks
Employee Information				Total Monthly Emoluments			
S/N	Surname	Other names	Date of Birth	Old Staff? (Tick)	New Staff? (Tick)	Gender	
1.	AKABUARO	DOMINIC				M	18,000

This form should be duly completed and retained by the employer to reflect the actual emoluments of the employees over the period of the report.

Signature/Date: 28/10/2023

From July 2014 - December 2019 $\Rightarrow 66$ months $190 = 180 \times 66 = \$11,880$ ~~off~~ ~~2010/2023~~



National Identity Management System
Federal Republic of Nigeria
National Identification Number Slip (NINS)



Tracking ID: STVWFA300N1	Surname: AKABUIRO	Address: 19 OBA AKENZUA CRESCENT ONIKERE		
NIN: 21912315406	First Name: DOMINIC			
	Middle Name: OBILOK			
	Gender: M	JIGADAN OY		
Note: The <i>National Identification Number (NIN)</i> is your identity. It is confidential and may only be released for legitimate transactions. You will be notified when your National Identity Card is ready (for any enquiries please contact)				
helpdesk@ninic.gov.ng	www.ninic.gov.ng	0700-CALL-NINIC (0700-2255-646)	National Identity Management Commission 11, Seaside Crescent, Off Oba Akenuwa Street, Zone 5, Wuse, Abuja, Nigeria	