



FEDERAL REPUBLIC OF NIGERIA

NIGERIA SOCIAL INSURANCE TRUST FUND (NSITF)

(EMPLOYEES' COMPENSATION ACT, 2010)

EMPLOYEES' SCHEDULE OF PAYMENT

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

CPH/PH/A SPEC/MCU
CID

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 TTLTLE	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	Atta	Yousuf	-	-	10/02/75	M	Married	001	August 2023	-	Director	bagi	Ikene	Ikene	081251 0150	-	Pin	AKO	4		22
2	Abdullah	Ishmael	Danbatta	-	08/01/87	M	Married	002	August 2023	-	Director	Nasar	Lafan	Lafan	081057 0152	-	Pin	AKO	1		2
3	Austin	Stephen	Danbatta	-	20/08/88	M	Single	003	August 2023	-	Secretary	Delta	Delta	-	081542 0157	-	Pin	AKO	1		2
4																					
5																					
6																					
										August 2023 - December, 2024											
										990,000 X 1% = 9900 X 17 months											
										= 15,300											
										ACCT											

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.....
12/02/2024

NAME OF OFFICER.....
ATA YAKUBU

POSITION.....
MD

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

Registration of Employer

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

PART 1: TYPE OF BUSINESS

(Mark 'X' as Appropriate)
 Public/Private Limited Company ☒ Informal Sector Employer ☐ Partnership ☐ Sole Proprietorship ☐
 Others (please specify) []

PART 2: ORGANIZATION/EMPLOYER INFORMATION:

2.1 Employer Name: EPH PHATA SPECIALTIES LTD
 2.2 Incorporation Number: RC 7072213
 2.3 Address: 2014
 2.4 Postal Address: SAME AS ABOVE
 2.5 Tel. No. 1: 08066925599
 2.6 Tel. No. 2: -
 2.7 Email: 05172442809400-com
 2.8 Does Employer have other branches and subsidiaries? Yes ☐ No ☒ If "Yes", fill attached form (ECS RE01b)
 2.9 Year of Establishment/Incorporation: 28 07 2023

PART 3: PARTICULARS OF CONTACT PERSON

3.1 Surname: ATT
 First Name: YAKUBU
 Tel. Number: 08066925599
 Mode of Identification: National ID. []
 Specify ID. Number: []
 Driver's License [] International Passport ☒ Specify ID. Number: []

PART 4: BUSINESS SECTOR CATEGORIES:

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

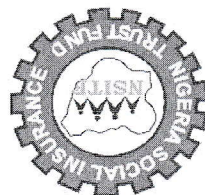
PART 5: DECLARATION BY EMPLOYER OR AUTHORIZED PERSON:

I certify that the above particulars are correct

Signature or Thumbprint: MD

Date: 12/02/2024

Surname: ATT First name: YAKUBU Official Stamp (if any):



**ECONOMIC COMMUNITY
OF WEST AFRICAN STATES**
COMMUNAUTÉ ÉCONOMIQUE DES ÉTATS
DE L'AFRIQUE DE L'OUEST
COMUNIDADE ECONOMICA DOS ESTADOS
DA AFRICA DO OESTE

FEDERAL REPUBLIC OF
NIGERIA

REPUBLIQUE FÉDÉRALE DU NIGÉRIA
REPUBLICA FEDERAL DA NIGERIA

PASSPORT

PASSEPORT
PASSAPORTE

FEDERAL REPUBLIC OF NIGERIA

Passport / Passeport

1000

NGN

Passport No. / № Паспорт B00001-1729

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

YAKUBU
GIVEN NAMES / PHONETIC

NIGERIAN
Ministry of Education

DATE OF BIRTH / DATE DE NAISSANCE
19 JAN / JAN 73

M
 KADUNA
 STATE OF KADUNA / MINISTRY OF AGRICULTURE
 STATE OF KADUNA / MINISTRY OF AGRICULTURE

04 JUL / JUL 19

Date of expiry / Date d'expiration 03 JUL / JUL 24

— *Содержание* —

ABUJA HORROR

54311549039
NIN

Translating Research: Researcher's Handbook

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