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)

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 TLTLE	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	TOLU	JOSEPH	A	—	2/9/89	M	MARRIED	—	—	—	SEC	O/O	IBADAN	IBADAN	—	—	—	—	—	—	30,000
2	KEMI	BUKOLA	F	—	20/11/86	F	SINGLE	—	—	—	OFFICER	OGUN	IJEBU	IJEBU ODE	—	—	—	—	—	—	30,000
3	FAVOUR	DANIEL	F	—	14/6/91	F	SINGLE	—	—	—	ACCOUNTANT	KOGI	LOKOJA	LOKOJA AVE	—	—	—	—	—	—	30,000
4																					
5																					
6																					
7																					
8																					
9																					
10																					

July 2023 - Dec 2023

90,000 x 1% = 900

900 x 6 months

= ₦ 5,400

90,000.00

NSITF KAGINI BRANCH
ACCOUNT UNIT
CHECKED
Name: Mary Peace
Sign:
Date: 31/8/2023

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.....

NAME OF OFFICER..... AHMED ALUMBA

POSITION..... M.D

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: FIMCHES GREY PANTHER NIGERIA LTD

2.2 Incorporation Number: RC7040403 2.3 Address: 199

MAMUDA STREET OPP ECWA CHURCH

Local Govt.: KUCHIGORO AMAC State: FCT

2.4 Postal Address:

2.5 Tel. No. 1: 08034256733 Tel. No. 2:

2.7 Email: ahmedyalco04@gmail.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: 2023

PART 3: PARTICULARS OF CONTACT PERSON

3.1 Surname: AHMED Middle Name:

First Name: TAKUBU Position: M.D

Tel. Number: 08034256733 Mode of Identification: National ID. [ ]

Driver's License [ ] International Passport [✓] Specify ID. Number:

PART 4: BUSINESS SECTOR CATEGORIES:

Construction [ ] Mining [ ] Banking & Finance [ ] Manufacturing [ ] Aviation [ ]

MDAs [ ] Oil & Gas [ ] Agriculture [ ] Energy [ ] Telecom [ ] Others (please specify):....

General contractor

PART 5: DECLARATION BY EMPLOYER OR AUTHORIZED PERSON:

I certify that the above particulars are correct

Signature or Thumbprint:..... Position: M.D Date: 08/08/23

Surname: AHMED First name: TAKUBU Official Stamp (if any):.....

National Identity Management System

Federal Republic of Nigeria

National Identification Number Slip (NINS)

Tracking ID: S21MKIUZTOW03PA	Surname: OLAYINKA	Address: 10 ALAYAKI STREET MUSHIN	
NIN 80807828255	First Name: ADUKE		
	Middle Name: OLUWASEYI	22 SHOTINOYE STREET	
	Gender: F	PALM-AVENUE	
		LA	

Note: The *National Identification Number (NIN) 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@nimc.gov.ng	www.nimc.gov.ng	0700-CALL-NIMC (0700-2255-646)	National Identity Management Commission 11 Sokode Crescent Off Dalaba Street Zone 5 Wuse, Abuja Nigeria