

NIGERIA SOCIAL INSURANCE TRUST FUND
(Employee Compensation Act, 2010)
Employees' Schedule of Payments
(Section 4(1)(b) of the Act)

Employer's Name: MARDOS GENERAL MERCHANDISE W.A. LTD

Employer's NISIT No:

S/N	SURNAME	FIRST NAME	MIDDLE NAME	GENDER (M/F)	EMPLOYEE ID NUMBER	EMPLOYEE DATE OF EMPLOYMENT	DATE OF BIRTH	STATE OF ORIGIN	LGA	TOWN	CONTACT PHONE NUMBER	ALTERNATE PHONE NUMBER	MEANS OF IDENTIFICATION (DRIVERS' LICENSE, INTL. PASSPORT, NAIJ. ID)	STATE OF RESIDENCE	ADDRESS OF EMPLOYEE	JOB TITLE	MARITAL STATUS	NUMBER OF PRIMARY DEPENDANTS (SPOUSE & CHILDREN)	MAIRA	KORO	TOTAL MONTHLY EARNINGS
1	AMVASOR	CHIKWADO	MARTINO	M	1	2014	02/11/1989	ANAMBRA	NNEWI SOUTH	EWULUMILU	8061155618	-	DRIVERS' LICENSE	ANUJA	MAIEKODUNMI NO 3 WOSSES CRESCENT, UTAO	CEO	SINGLE	0		30,000	0
2	AMVASOR	JERRY	CHIBUNNA	M	2	2014	11/05/1992	ANAMBRA	NNEWI SOUTH	EWULUMILU	8104054512	-	NIN	ANUJA	FLAT 5 HSE 4 MUKTAR ADMAN STR. DANTATA ESTATE	SECRETARY	SINGLE	0		30,000	0
3	AMVASO	BEN	CHUKWUDALU	M	3	2022	11/04/1982	ANAMBRA	NNEWI SOUTH	EWULUMILU	803120670	-	NIN	ANUJA		STAFF	SINGLE	0		30,000	0
4																					
5																					
6																					
7																					
8																					
9																					
10																					
11																					
12																					
13																					
14																					
15																					
16																					
17																					
18																					
19																					
20																					
21																					
22																					
GRAND TOTAL:																				90,000	

This form should be duly completed and submitted by the employer immediately after registration to reflect the estimate of earnings of the employees. It should be completed any time payment is made.

Authorized Signatory

Name of officer: Position: Date:



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

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: **MARDOS GENERAL MERCHANDISE W.A. LIMITED**
 1.2 Incorporation Number: **1068591** 1.3 Address: Street Number: **40** **3**
 Street Name: **MOSSES MAJE KODUYMI** City: **UTAKO**
 Local Govt: **AMAC** State: **FCT**
 1.4 Postal Address:
 1.5 Tel Number: **08061155618** 1.6 Fax Number:
 1.7 Email: **MARDOSGENERALMERCHANDISE@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):

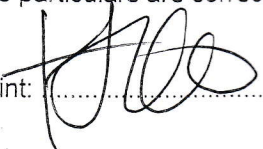
2.1 Surname: **ANYASOR** Middle Name: **MARTINO**
 First Name: **CHIKWADO** Position: **DIRECTOR**
 Tel. Number: **09061155618** Mode of identification: National I.D. [] or Drivers Licence ☒ or
 International Passport [] Specify ID. Number: **ABC38246AA02**

PART 3: BUSINESS SECTOR CATEGORIES:

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

PART 4: DECLARATION BY EMPLOYER OR AUTHORISED PERSON:

I certify that the above particulars are correct

Signature or Thumb Print: 

Position: **Director**

Date: **27/6/22**

Surname: **Anyasor**

First Name: **Martino**

Official Stamp (if any):

FEDERAL REPUBLIC OF NIGERIA
NATIONAL DRIVERS LICENCE

L/NO ABC38246AA01

PRIVATE

CLASS E

FCT

ISS 01-11-2021

D of B 02-11-1989

EXP 02-11-2026

ANYASOR, MARTINO CHIKWADO
NO 3 MOSES MAJEKODUNMI CRESCENT
UTAKO DISTRICT
ABUJA, FCT

SEX M HT 1.50M 1st ISS ST NAS

BG O+ F/MARKS N GL N REP 1 REN 3

END P

N of K 08035016474

DATE OF 1st ISS 02-11-1989

HOLDER'S
SIGNATURE

ENDORSED
REGISTRARY