

FEDERAL REPUBLIC OF NIGERIA
NIGERIA SOCIAL INSURANCE TRUST FUND (NSITF)
(EMPLOYEES' COMPENSATION ACT, 2010)

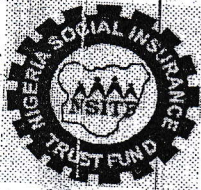
EMPLOYEES' SCHEDULE OF PAYMENT

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

MTN 1540 MULTI-B1
LTD
June 2023 - Dec 2023

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	Sams	Mohammed	Abdullahi	Plot 136 Chunwa II Abuja		Male	Ms/Q										Vin	Per Abia			30,000
2	Abulata	Muhammad	Abdullahi			Male															30,000
3	Abulata	Muhammad	Abdullahi			Male															30,000
4	Abulata	Muhammad	Abdullahi			Male															30,000
5	Abulata	Muhammad	Abdullahi			Male															30,000
6	Abulata	Muhammad	Abdullahi			Male															30,000
7	Abulata	Muhammad	Abdullahi			Male															30,000
8	Abulata	Muhammad	Abdullahi			Male															30,000
9	Abulata	Muhammad	Abdullahi			Male															30,000
10	Abulata	Muhammad	Abdullahi			Male															30,000

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.



ECS.RE.01a

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: MUNTISAH MULTI-BIZ LTD

2.2 Incorporation Number: AL6982922

2.3 Address: PLOT 138

Local Govt.: FCT

State: ABUJA

2.4 Postal Address:

2.5 Tel. No. 1:

Tel. No. 2:

2.7 Email: muntisah13@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: 23-05-2023

PART 3: PARTICULARS OF CONTACT PERSON

3.1 Surname: ABULLAH Middle Name: MOHAMMED

First Name: SANUSI Position: MANAGER

Tel. Number:

Mode of Identification: National ID. ☒

Driver's License ☐ International Passport ☐ Specify ID. Number: 91965386972

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: [Signature] Position: Manager Date: 3/7/23

Surname: ABULLAH First name: SANUSI Official Stamp (if any):



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



Tracking ID: 1FNXB7J13F0014F	Surname: AUDI	Address: 844 FARU RELIABLE HOMES RAMATU GULAMA STREET LIFE CAMP FCT ABUJA		
NIN: 93356635420	First Name: MUNTASRA			
	Middle Name: ISAH			
	Gender: F	LIFE CAMP FCT Abuja		

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@ninc.gov.ng	www.ninc.gov.ng	0700-CALL-NIMC (0700-2255-646)	National Identity Management Commission 11, Sokoto Crescent, Off Durrat Street, Zone 5 Wuse, Abuja Nigeria
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