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	Udokwu	KC	Theophilus	Utalco District	15/09/1976	Male	Married			Kenoudule	Manager	Anambra	Nnewi South	Osumenyi	08035655764	08036337099	Drivers Licence	FCT Abuja	Mrs Happiness Udokwu	5	30,000
2	Nwaogu ~~Linda~~	Linda	Onyinye	Utalco	10/04/1993	Female	Not Married			Supervisor	Supervisor	Anambra	Nnewi South	Osumenyi	08094555534	08033346556	Intl passport	FCT Abuja	Ethel Nwaogu	1	30,000
3	Nwaosa	Innocent	Ifeanyi	Utalco Plaza	12/08/1986	Male	Not Married			Director	Director	Anambra	Nnewi South	Osumenyi	08111110320	08033346556	Intl Passport	FCT	Mrs Ethel Nwaosa	1	30,000
4																					
5																					
6																					
7																					
8																					
9																					
10																					

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: [signature] NAME OF OFFICER: K-C-Udokwu POSITION: Secretary/General Manager

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 [X] Informal Sector Employer [ ] Partnership [ ] Sole Proprietorship [ ]

Others (please specify) [ ].....

PART 2: ORGANIZATION/EMPLOYER INFORMATION:

2.1 Employer Name: SCENTLY LIMITED

2.2 Incorporation Number: 1791682 2.3 Address: NO 21 MOSES A MAJEKODUNMI CRESCENT UTAKO

Local Govt.: State: FCT ABUJA

2.4 Postal Address:

2.5 Tel. No. 1: 08111110320 Tel. No. 2: 08036337099

2.7 Email: scently8@gmail.com

2.8 Does Employer have other branches and subsidiaries? Yes [ ] No [X]. If "Yes", fill attached form (ECS RE01b)

2.9 Year of Establishment/Incorporation: 2021/05/10

PART 3: PARTICULARS OF CONTACT PERSON

3.1 Surname: Udokwu Middle Name: K.C.

First Name: Theophilus Position: MANAGER

Tel. Number: 08036337099 Mode of Identification: National ID. [ ]

Driver's License [X] International Passport [ ] Specify ID. Number: 3PH2381AA

PART 4: BUSINESS SECTOR CATEGORIES:

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

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

.....

PART 5: DECLARATION BY EMPLOYER OR AUTHORIZED PERSON:

I certify that the above particulars are correct

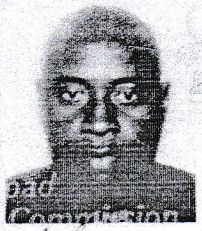
Signature or Thumbprint: ..... Position: General Manager Date: 11/05/2021

Surname: UDOKWU First name: K.C. Official Stamp (if any): .....

FEDERAL REPUBLIC OF NIGERIA
NATIONAL DRIVERS LICENCE

FCT

L/NO BDN2381AA | PRIVATE | CLASS B



ISS 12-09-2019
D of B 15-09-1976 EXP 15-09-2024

UDOKWU, THEOPHILUS K.C
20 HARGEYSA STR.
ZONE 5 WUSE
ABUJA, FCT

SEX M HT 1.60M 1st ISS ST SOK
BG O+ F/MARKS N GL N REP 0 REN 3
END P
N of K 08035655764
DATE OF 1st ISS 18-12-2001

HOLDER'S SIGNATURE

AUTHORISED SIGNATORY

NIN: 11444713639

FEDERAL REPUBLIC OF NIGERIA

National Identity Card

SURNAME
UDOKWU

FIRST NAME
THEOPHILUS

MIDDLE NAME
KENECHUKWU

DATE OF BIRTH | ISSUE DATE
15 SEP 76 | 19 JAN 15

NATIONALITY | SEX | HEIGHT
NGA | M | 176cm

5298 2050 0598 2009

NGA

EXPIRY
01/20

DOCUMENT NUMBER
7138931526