

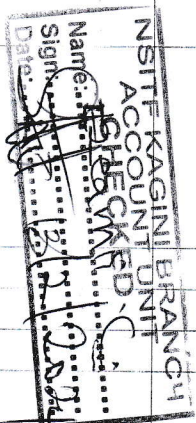


FEDERAL REPUBLIC OF NIGERIA
NIGERIA SOCIAL INSURANCE TRUST FUND (NSITF)
EMPLOYEES COMPENSATION ACT, 2010
Employees Schedule of Payments

(Any wrong information/declaration is an offence and is punishable under section 39, 40 and 65 of the ECA 2010).

STRATUS-OPAL GLOBAL LIMITED Dec. 2021 - Dec 2022

S	Employee First Name	Employee Middle Name	Employee Last Name	Employee Address	Gender	Marital Status	Employee ID	Employment Date	Employee Email	Job Title	State of Origin	Local Government Area	Town	Contact Phone	Alternate Phone	Means of Identification	of Identification Number	of Identification Issue	Next of Kin	Next of Kin Number	NO of Dependents	Monthly Ret
1	RABIU	NURA	ABDULLAHI	10, WHARF ROAD, APAPA, LAGOS	M		002			DIRECTOR	KANO											#30,000
2	RABIU	NURA	ABDUSAMAD	10, WHARF ROAD, APAPA, LAGOS	M		001			ADM	KANO											#30,000
3	IBRAHIM	DANBARAKI	ALI	10, WHARF ROAD, APAPA, LAGOS	M		003			Secretary	KANO											#30,000
4																						
5																						
6																						



Dec 2021 - Dec 2024 = 37 months

16 = 900 x 37 = 33,300

RABIU NURA ABDUSSAMAD

DIRECTOR

Public/Private Companies [] Informal Sector Employer [] Partnership [] Sole Proprietorship [] Others (please specify) []

Sole Proprietorship [] Others (please specify) []

PART I: PARTICULARS OF BUSINESS (for MDAs, public and private companies):

1.1	Employer Name:	STATUS-OPAL-GL03AL	71M1T3D
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1.2 Incorporation Number: 1866211

Street Name: 11th St

Local Govt: APAPAP

[illegible]

1.5 Tel Number: 08099995410

[illegible]

1.7 Email:

A	B	D	A	N	D	A	W	A	K	1	@	g	m	a	i	l	.	c	o	m
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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: NURAH	Middle Name: RAJIV
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First Name: A B D u l s s q d Position: D i r e c t o r

Tel. Number: 0809495410

International Passport []	Specify ID. Number:	1	4	8	8	9	3	6	3	7	9	4			
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PART 3: BUSINESS SECTOR CATEGORIES:

Construction ☐ Mining ☐ Banking & Finance ☐ Manufacturing ☐ Aviation ☐

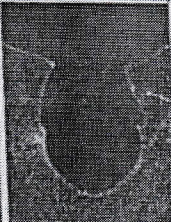
MDAs	Oil & Gas	Agriculture	Energy	Telecom	Others (please specify):...

PART 4: DECLARATION BY EMPLOYER OR AUTHORIZED PERSON:

I certify that the above particulars are correct

Signature or Thumb Print: _____ Position: _____ Date: 7/5/11/2021

Surname: KABICA First Name: Abdus Samad Official Stamp (if any):

 National Identity Management System Federal Republic of Nigeria National Identification Number Slip (NINS)			
Tracking ID: 5790QYKXV00047Q	Surname: RABU	Address: 2 AMINU KANO WAY GORON BUTSE	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)
NIN: 50506224663	First Name: ABOALLAH	Gender: M Middle Name: NURA KANO	
Email: info@nins.gov.ng Website: www.nins.gov.ng Toll-free: 199-5522-6629 / CALL-NIN	National Identity Management Commission Abuja, FCT, Nigeria		