

EDO STATE GOVERNMENT



INTERNAL REVENUE SERVICE

P. M. B.102, Benin City. bir@edostate.gov.ng

		101-121-00
No. A	Discount 19	20
	Reference Numb	er/TIN No:

Return by Employer of persons working In Edo State of Nigeria for whom Tax deductions were made and remitted in the preceding year Name of Employer: Address:

e-mail

Pursuant to Section 81 Subsection (2) of PITA 2004 and Section 10 of PAYE regulations 2002, you are required to complete and return this From the Executive Chairman of the Internal Revenue Service at the above address or at the appropriate Tax Office in your area not later than 31st of January of every year.

Serial No.	Name of Employee	Nationality	Individual RIN	Date of First Appointment	Individual G.S.M.	Annual Basic Salary	Rent in Cash/Kind	Transport in Cash/Kind	Leave Bonus Allowance	13th Month Salary	Other Allowances	Annual Tax Reliefs	Annual Tax Deducted
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CERTIFICATION

I hereby certify that the above is the complete and correct list of staff of this company resident and or working in Edo State of Nigeria employed by the above company. I also certify that the information, particular the salaries and allowance stated for each employee above are correct and exhaustive is purishable under section 81, subsection 3 of Personal Income Tax Act, 2004 (as amended) which default thereto

Director or its equivalent	and the property of the property of the part of the property of the property of the property of the property of		
Director or its equivalent	SignatureName	Designation/Position held	Date