

INSTRUCTIONS

1. Name of Employer: State name of employer or name of business for w hich payment is being made.
2. Taxpayer Registration Number: Employer's TRN. MUST include the Branch Number, w here applicable.
NB: Sole Proprietors w ho are employers are required to include a Branch Number.
For example,

1	2	3	4	5	6	7	8	9	—	0	0	0	1
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3. Business Address: The current address of the business location.
4. Month of Remittance: The year and month of the Remittance.
For example,

2	0	0	6	—	0	1
Year				Month		
5. Tick, if Applicable: New Address: if the business address has been changed.
Revised Remittance: if the Net Tax payable is being amended.
7. Total Emoluments: Total Gross Salary, including all taxable perquisites paid to all employees for the month.
8. Net Tax Payable: Total Tax Deductible less any refunds, paid w ithin the month.
9. Amount Being Paid: Exact amount being paid w ith this Remittance.

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