PAYE ANNUAL RETURN FORM A

NAME OF ORGANISATION :

ADDRESS:

TAX IDENTIFICATION NUMBER:

PHONE NUMBER :

EMAIL ADDRESS:

										ALLOWANCES								STATUTORY RELIEFS			
S/N	SURNAME	FIRST NAME	MIDDLE NAME	MOBILE NUMBER	EMAIL	TAX IDENTIFICATION NUMBER	DESIGNATION	NATIONALITY	BASIC SALARY	HOUSING	TRANSPORT	MEAL	UTILITY	ENTERTAINMENT	LEAVE ALLOWANCE	OTHERS	GROSS INCOME	NHF	NHIS	LIFE ASSURANCE	PENSION SCHEME