



Annual Return of Contribution

SUMMARY SHEET

Financial Year

Employer

Address Telephone No.

Registration No. [] Nature of Business

Total number of sheets included in the return []

For Official Use

NPF NSF

No. of employees. []

Centre:

Locality:

Total Amount of Contributions NPF []

Return No.

Total Amount of Contributions NSF []

R/Unit:

Totally yearly wage bill on which levy has been paid []

Date received:

Date sent to Contributions:

I certify that to the best of my knowledge the information on this return is correct.

Signature: Name: *Position:

Date:

*The person signing this return should be the proprietor or in the case of company, the Secretary or the Director.

DETAILS OF CONTRIBUTIONS

Table with 7 columns: (1) S.N., (2) National Identity Number, (3) R A T E, (4) Surname (IN BLOCK LETTER), (5) Other Names, (6) Contributions (NPF), (7) Contributions (NSF). Rows 1-15.

RATE DESCRIPTIONS

Table with 5 columns: Rate Code, Employee's Share of Contributions (NPF) - %, Employer's Share of Contributions (NPF) - %, Employer's Share of Contributions (NSF) - %, Employee's Share of Contributions (NSF) - %. Rows for S, T, G and empty rows.