# **Reports – Country Specific** Statutory Reports - Tanzania



Each Africa country has a report platform for the statutory reports which generate in excel/CSV format.

Tanzania country specific reports are found on the Tanzania Reports screen. To access from the Main Menu, go to Reports >> Tanzania Reports

A report setup is required for each report:

			reporta			
I	TX300(1) Emp Taxes Payment Cdt Slip	0	LAPF	С	Citibank DFT Bank File	c
I	NSSF Monthly Return	С	WCR-3	0	Standard Chartered Bank File	с
F	P9, P10 and PAYE	0	WCF Online Submission	0	Stanbic nBOL Bank File	С
F	PPF Monthly Return Form	0	PSSSF Form	С		
\$	SDL Half Year Return	0	FNB Online Banking Enterprise (RSA)	С		
(	SDL Monthly Return	0	Tanzania Bank File	0		
١	NCF Form	С	FNB Online Banking Enterprise	0		

#### Reports

Statutory Reports	Explanation	
ITX300 (1) Emp Taxes	Employment Taxes Payment Credit Slip	Monthly
NSSF Monthly Return	National Social Security Fund Return	Monthly
P9, P10 and PAYE	Tax Deduction Card and Employer's 6 Monthly Certificate	Bi-Annual
PPF Monthly Return Form	Pa Rastatal Pension Fund	Monthly
SDL Half Year Return	SDL Return Half Year from 2016/2017	Bi-Annual
SDL Monthly Return	SDL Monthly Return from 2016/2017	Monthly
WCF Form	Worker's Compensation Fund	Monthly
WCF Online Submission	Worker's Compensation Online Submission	Monthly
WCR-3	Return of Earnings	Annual
LAPF	Tanzania LAPF 10 Report	Monthly
PSSSF Form	Public Service Social Security Fund	Monthly

#### 1. ITX300

<image/>							
EMPLOYMENT TAXES PAYMENT CREDIT SLIP EMPLOYMENT CAXES PAYMENT CREDIT SLIP  Tarployrer's Name i Tarzania Standard Company  Name of Bank: Branch: Tarpayer's Bank A/C No: Employment Taxes Bank Account No: Employment Taxes Bank Account No: Bank Stamp and Teller's Signature  Tar Debit Number(s) [ Pegular (monthly) payment (tick if yes) (')     Pegular (monthly) payments (tick if yes) (')     Nume of Bank (tick if yes) (')							
Employee's Name:       Image: Im							
Employee's Name:       Tanzania Standard Company       TNL       TINTS31         Division/Branch:							
Division/Branch:							
Name of Bank:       Branch:       Taxpayer's Bank A/C No:         Employment Taxes Bank Account No:							
Employment Taxes Bank Account No:         Bank Stamp and Teller's Signature         Image: Signature							
Bank Stamp and Teller's Signature       Tax Debit Number(s)         Image: Tax Debit Number(s)       Image: Tax Debit							
Image: Signature instruction by accepting bank:       Original: for Tapager         Duploate: passed with bank statement to TFA Triploate: for Bank.       Stamp (if ang):							
In legislation approximation provided and provi							
Image: State member SDL (tick if yes) (*)         PAYE, amount TZS       240 300.00         SDL, amount TZS       94 500.00         SDL, amount TZS       94 500.00         Please accept for the credit of the Commissioner the sum of TZS       334 800.00         In Words (sum):       Three Hundred Thirty Four Thousand Eight Hundred Shillings and No Cents         Payroll Month(s) for / from:       1/2017         If submitting cheques       Cheque No         Name of Bank / Branch       Amount         If submitting cheques       Cheque No         Name of Bank / Branch       Amount         It we certify that the particulars entered on this form are correct.       Stamp (if ang):         Signature							
PAYE, amount TZS       240 300.00         SDL, amount TZS       94 500.00         SDL, amount TZS       94 500.00         Please accept for the credit of the Commissioner the sum of TZS       334 800.00         In Words (sum):       Three Hundred Thirty Four Thousand Eight Hundred Shillings and No Cents         Payroll Month(s) for / from:       1/2017         If submitting cheques       Cheque No         Name of Bank / Branch       Amount         If submitting cheques       Cheque No         Name of Bank / Branch       Amount         It we certify that the particulars entered on this form are correct.       Stamp (if ang):         Signature							
PARE, amount T23     244 300.00       SDL, amount T2S     94 500.00       Please accept for the credit of the Commissioner the sum of TZS     334 800.00       In Words (sum):     Three Hundred Thirty Four Thousand Eight Hundred Shillings and No Cents       Payroll Month(s) for / from:     1/2017       If submitting cheques     Cheque No       Name of Bank / Branch     Amount       It submitting cheques     Cheque No       Name of Bank / Branch     Amount       It ve certify that the particulars entered on this form are correct.     Stamp (if ang):       Signature							
SUE, amount 125     94 500.00       Please accept for the credit of the Commissioner the sum of TZS     334 800.00       In Words (sum):     Three Hundred Thirty Four Thousand Eight Hundred Shillings and No Cents       Payroll Month(s) for / from:     1/2017       If submitting cheques     Cheque No       Name of Bank / Branch     Amount       If submitting cheques     Cheque No       Name of Bank / Branch     Amount       It ve certify that the particulars entered on this form are correct.     Stamp (if ang):       Signature							
Please accept for the oredit of the Commissioner the sum of T2S     334 800.00       In Words (sum):     Three Hundred Thirty Four Thousand Eight Hundred Shillings and No Cents       Payroll Month(s) for / from:     1/2017       If submitting cheques     Cheque No       Name of Bank / Branch     Amount       It submitting cheques     Cheque No       Name of Bank / Branch     Amount       It was a constrained on this form are correct.     Name       Name     Stamp (if ang):       Signature     Date:       Distribution by accepting bank:     For official use only       Distribution by accepting bank:     Triplicate: for Bank							
In Words (sum):  Three Hundred Thirty Four Thousand Eight Hundred Shillings and No Cents  Payroll Month(s) for / from:  If submitting cheques  Cheque No  Cheque No  Name of Bank / Branch  Amount  Amount  Total  Declaration:  I/Ve certify that the particulars entered on this form are correct.  Name  Correct  Stamp (if any):  Signature  Date:  Distribution by accepting bank:  Distribution by accepting bank:  Distribution by accepting bank:  Distribution by accepting bank:  Distribution bank statement to TRA Triplicate: for Bank							
Payroll Month(s) for / from:       I/2017       to       I/2017         If submitting cheques       Cheque No       Name of Bank / Branch       Amount         If submitting cheques       Cheque No       Name of Bank / Branch       Amount         If submitting cheques       Cheque No       Name of Bank / Branch       Amount         If submitting cheques       Cheque No       Name of Bank / Branch       Amount         If ve certify that the particulars entered on this form are correct.       Name       Stamp (if ang):         Signature       Stamp (if ang):       Signature         Date:       Cheque Paper       Duplicate: passed with bank statement to TRA       For official use only         Duplicate:       for Bank       Image: Paper       Image: Paper         Duplicate:       for Bank       Image: Paper       Image: Paper         Duplicate:       For official use only       Image: Paper         Duplicate:       for Bank       Image: Paper       Image: Paper							
If submitting cheques							
Declaration:     Image: Constraint of the particulars entered on this form are correct.       Name							
Image: Declaration:     Image: Declaration:       IVVe certify that the particulars entered on this form are correct.       Name							
Total       Declaration:       I/We certify that the particulars entered on this form are correct.       Name							
Declaration:       I/We certify that the particulars entered on this form are correct.       Name							
Name							
Signature							
Date:							
Distribution by accepting bank: Original: for Taxpayer Duplicate: passed with bank statement to TRA Triplicate: for Bank							
Driginal: for Taxpayer Duplicate: passed with bank statement to TRA Triplicate: for Bank							
Duplicate: passed with bank statement to TRA Triplicate: for Bank							
IF a INIT- Statement is submitted (no payment is made). Submit this form on or before the due date directly to the appropriate Tax Office and not through the bank.							
In case of any difficulty in filling this form contact the Tax Office.							
(*) Do not miz up regular payments (monthly with debit payments (other payments) in one form)							

Field Description	Explanation	Sage 200 VIP Field Mapping			
Name of Employer	Registered Company Name	From the Mai Click on Click on Review	in Menu: Company Basic Company Information Company Name for Reports		
TIN Number	The tax reference number for the employer's business.	From the Mai Click on Click on Review	in Menu: Company Basic Company Information Tax Registration Number		
Division/Branch	The branch or division of the employer's business which you are making payment for.				

Name of Bank	Name of the bank which the employer uses.
Branch	Name the branch of the bank which you are using to make the payments
Taxpayer's Bank A/c No	The employer's bank account number.
Employment Taxes Bank Account No	The TRA's Bank Account Number.

Field Description	Explanation
Bank Stamp and Teller's Signature	
Tax Debit Number(s)	Special Bank Account Numbers. When the employer is not making regular payments, they are given the tax debit numbers buy the TRA to make payments.
Regular payments (tick if yes)	Tick if you will be making regular monthly payment. A regular payment is when you are paying only the SDL and PAYE deducted from the employees.
Other payments (tick if yes)	Tick if you will be making any other payments such as penalties and fines for late payments.
Nil-Statement PAYE (tick if yes)	Tick if there is no PAYE deducted at all for the employees in the reporting period(s).
NIL-Statement SDL (tick if yes)	Tick if there is no SDL contribution at all in the reporting period(s).
PAYE, amount TZS	Show the amount of PAYE which you are paying for the reporting period(s).
SDL, amount TZS	Show the amount of SDL which you are paying for the reporting period(s).
Please accept for the credit of the	Fill in the sum of the SDL and PAYE amounts above. The total
Commissioner the sum of TZS	amount which you are paying at the bank.
In words (sum):	Write in words the total amount which you are paying to the bank.
Payroll Month(s) for / from / 20 to / 20	Fill in the months which you are making the payments for.
Cheque No	Fill in the cheque number(s) which you are using to make this payment.
Name of Bank / Branch	Name of the bank issuing the cheque and the branch.
Amount	Show the amount on that cheque.
Total	The total Amount which is paid by cheque. Note that the employer could be paying with more than one cheque.
Name	Name of the employer's representative making the payment.
Stamp (if any):	Company stamp if any.
Signature	Signature of the employer's representative making the payment.
Date: / / 20	fill in the date on which the employer is making the payment at the bank

#### 2. NSSF Return

THE UNITED REPUBLIC OF TANZANIA NSSF JAMHURI YA MUUNGANO WA TANZANIA FOR NATIONAL SOCIAL SECURITY FUND SHIRIKA LA TAIFA LA HIFADHI YA JAMII MEMBER'S CONTRIBUTION RECORDS KUMBUKUMBU YA MICHANGO YA WANACHAMA								
Employer's Jina la Mwa	Name ajiri Tanzania	Demo Company				Page No. Ukurasa	Page 1 of 1	
Address Anuani	345 Prosperity Road,	City Centre, Dar es Salaa	am, 0001			Cheque No. Namba ya Hundi Amount TZS		
Employer's Namba ya I	L Registration Number Mwajiri	NSSF12345				Kiasi Sh. Cash TZS		
Month of Contribution January January		Year Mwaka	2017		Receipt No. Namba ya Risiti			
District Nur Namba ya V	nber Wilaya				Date Tarehe			
S/No INSURED PERSON'S NAME JINA BIMA YA MTU			WAGE MSHAHARA	MEMBERSHIP N NAMBA Y/ MWANACHA	IP NUMBER CONTRIBUTION ( BA YA MCHANGO KWA N ACHAMA		REMARKS MAELEZO YOYOTE	
1	KEITH EDWARDS		800 000.00	NSSF	M98765	160 000.00		
2 PRECIOUS SMITH 3 JANE ROBERTS			400 000.00	NSSF	M88888	80 000.00		
			900 000.00	NSSFM12345		180 000.00		
				PAGE TOT.	AL	420 000.00		
NOTE:	*To be used for NSSF re *Itumiwe na wanachan *Each page total must l	gistered members and full na waliokwisha andikishwa be shown separately.	contribution of 20% s a na mchango wa asi	hould be shown. limia 20 uonyeshw *Summary of all p	ve. bage total	ls must be shown on last p	age.	
	*Jumla ya kila ukurasa	ionyeshwe pekee.		*Jumla yah hesabu ya kila ukurasa ionyeshwe ukurasa wa mwisho.				

Field Description	Explanation	Sage 200 VIP Field Mapping			
Employer Name	Registered Company Name	From the Main M	lenu:		
		Click on	Company		
		Click on	Basic Company Information		
		Review	Company Name for Reports		
Address	Physical address of the employer	From the Main M	lenu:		
		Click on	Company		
		Click on	Basic Company Information		
		Click on	Address details tab		
		Review	Address details		
Employer's	Employer's reference number at	From the Main N	lenu:		
Registration	the NSSF	Click on	Company		
number		Click on	Basic Company Information		
		Click on	Additional Information Tab		
		Review	NSSF Number on Additional		
			Info 1 Field		
Month of	Reporting Month	Processing Peric	od Month		
Contribution					

Year	Current Year	Processing Period Year		
Regional/District code number	District number, to be provided by the client.	From the Main M Click on Click on Click on Review	<i>I</i> lenu: Company Basic Company Information Additional Information Tab District Number on Additional Info 2 Field	

Field Description	Explanation
Cheque/Mo/Po No.	For Official Use only
Date of Cheque/Mo/Po	For Official Use only
Amount	For Official Use only
Bank/Post Office Branch	For Official Use only
Cash Tshs	For Official Use only
Receipt No.	For Official Use only
Date of receipt	For Official Use only

Field Description	Explanation	Sage 200 VIP Field Mapping
S/No	Sequential number, e.g. 1, 2, 3 etc.	
Insured Person's name	Employee's Full name Name and surname Not initials	From the Main Menu: Click on Employee Click on Change Employee Select Employee Review Employee First Name and Surname
Wage	Employee's monthly gross income used to calculate the NSSF contributions.	According to selections made when Report Setup was done
Membership Number	Employee's membership / registration number with the NSSF.	From the Main Menu: Click on Employee Click on Change Employee Select Employee Click on Statutory Details Tab Review Number on Tax Office field
Contributions TSHS (20%)	Show the actual total contribution made by the employee and employer.	According to selections made when Report Setup was done
Remarks	Comments by Employer	

### 3. P9 Report

TANZANIA REVENUE AUTHORITY INCOME TAX DEPARTMENT TAX DEDUCTION CARD 2017									
Employer's Address:	1. Dar es Salaam	mpany						Payroll No:	TZA001
Employee's Name:	Keith Edwards							Employer's TIN No:	TIN7531
Basic         Housing         Allowances & Gross         Tax         Taxable         Tax         Less         Nett Ta           Month         Pay         Benefits         Pay         Deductible         Amount         Payable         Personal         Due           (rsher)         Carbon         (rsher)         Deductible         Amount         Payable         Personal         Due							Nett Tax Due		
	(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
January	800 000.00	0.00	0.00	800 000.00	80 000.00	720 000.00	98 100.00	0.00	98 100.00
February	800 000.00	0.00	0.00	800 000.00	80 000.00	720 000.00	98 100.00	0.00	98 100.00
March	800 000.00	0.00	0.00	800 000.00	80 000.00	720 000.00	98 100.00	0.00	98 100.00
April	800 000.00	0.00	0.00	800 000.00	80 000.00	720 000.00	98 100.00	0.00	98 100.00
May	800 000.00	0.00	0.00	800 000.00	80 000.00	720 000.00	98 100.00	0.00	98 100.00
June	800 000.00	0.00	0.00	800 000.00	80 000.00	720 000.00	98 100.00	0.00	98 100.00
TOTALS	4 800 000.00	0.00	0.00	4 800 000.00	480 000.00	4 320 000.00	588 600.00	0.00	588 600.00
FOR EMPLOYER'S USE									
AVERAGE MONTHLY TAXA	BLE INCOME (Totals )	f) / 6)	-	720 000.00					
TOTAL TAX Totals (g) = 588 600.00			588 600.00						
LESS TAX RELIEF (h) =			-	0.00					
PAID TAXES Totals (g - h)		1		588 600.00					

Field Description	Explanation	Sage 300 Peo	ple Field Mapping	
Employer Name	Registered Company Name	From the Main Menu:		
		Click on	Company	
		Click on	Basic Company Information	
		Review	Company Name for Reports	
Employer's TIN	Tax reference number	From the Main M	lenu:	
		Click on	Company	
		Click on	<b>Basic Company Information</b>	
		Review	Tax Registration Number	
Employer's	Physical address of the employer	From the Main M	lenu:	
Address		Click on	Company	
		Click on	<b>Basic Company Information</b>	
		Click on	Address details tab	
		Review	Address details	
Employee's	Employee's name and surname	From the Main M	lenu:	
Name		Click on	Employee	
Itallio		Click on	Change Employee	
		Select	Employee	
		Review	Employee First Name and	
		Surname		
Employee's Payroll Number	Employee's reference number on the Payroll	Employee Code		

Field Description	Explanation
Month	Print the individual months in the reporting period on each row. Fill in only 6 months in this table, either January to June or July to December.
Basic Pay	Show the basic salary of the employee for each of the months in the 6 months reporting period.
Housing	Show the taxable portion of the Housing allowance of the employee for each of the months in the 6 months reporting period.

Allowance & Benefits	Show the sum of all other taxable items (taxable earnings, benefits and company contributions) which the employee earned for each of the months in the 6 months reporting period; excluding the Basic Pay and the Housing allowance mentioned above.
Gross Pay	Calculate the sum of column (a), (b) & (c). for each of the months in the 6 months reporting period.
Tax Deductable Deductions	Show the sum of all tax deductible deductions of the employee for each of the months in the 6 month reporting period, e.g. approved retirement funds and NSSF
Taxable Amount	Calculate the Gross Pay less Tax Deductible deductions: (d) – (e)
Tax Payable	Show the actual tax amount for the tax deducted from the employee for each of the months in the 6 months reporting period.
Less Personal Reliefs	There are no personal reliefs. Leave blank.
Next Tax Due	Same as (e) because there are no Reliefs. Net tax paid is equal to the Tax payable.

#### 4. **P10 PAYE**

P10.						
	<u>TANZA</u>	NIA REVI	ENUE AU	THORITY		
P.A.Y.	E EMP	LOYER'S	6 MONT	HLY CERTIFI	CATE	
Employer's Name:	Tanzania S	tandard Co	mpany			
Address: Street ,						
Dar es S	alaam ,					
Period: January	2017 to Ju	ne 2017		TIN:	TIN	7531
Remittances	Amo	ount				
lanuary	2	40 300.00				
February	2	40 300.00				
March	2	40 300.00				
April	2	40 300.00				
Мау	2	40 300.00				
une	2	40 300.00				
Total	14	41 800.00				
Tax Band (Income Range)	No of Empls	Total W	age Bill	Total Tax Per	Range	% of Total Tax
0 - 170,000	0		0.00		0.00	0.00%
170,001 - 360,000	1	2 1	60 000.00	102	600.00	7.12%
360,001 - 540,000	0		0.00		0.00	0.00%
540,001 - 720,000	1	4 3	20 000.00	588	600.00	40.82%
720,001+	1	4 8	60 000.00	750	600.00	52.06%
Total	3	11 3	40 000.00	1 441	800.00	100.00%

Date Printed: 2018-01-09

Field Description	Explanation	Sage 200 VIP Field Mapping			
Employer Name	Registered Company Name	From the Main Menu:			
		Click on	Company		
		Click on	Basic Company Information		
		Review	Company Name for Reports		
Address	Postal address of the employer	From the Main Menu:			
		Click on	Company		
		Click on	Basic Company Information		
		Click on	Address details tab		
		Review	Address details		
TIN	The employer's Tax Registration	From the Main Menu:			
	number	Click on	Company		
		Click on	Basic Company Information		
		Review	Tax Registration Number		

Period	The 6 months reporting period.	
	It can only be one of the two	
	options: January to June or July to	
	December.	

Field Description	Explanation
Remittances	In this column show the Month and the tax year.
Amount	In this column, fill in the total actual PAYE paid for all employees in the respective month.
Total	Show the sum of the column at the Bottom of the column.
Tax Band (Income Range)	Values in this column are the same as the monthly tax tables.
No. of employees	Count the number of employees whose "average monthly taxable income" falls in this income range. To determine if the employee's income fall within this bracket: Calculate the monthly taxable income (after deductions) for that 6 months reporting period and divide by 6.
Wage Bill	The actual taxable income after deductions for the employee in this income range, for the 6 months reporting period.
Total Tax per range	Total tax paid by all employees in that income range. Show values for the 6 month reporting period.
Percentage of Total Tax	Percentage of tax paid in this income range out of a 100%.

5. **PPF** 

PPF/CONT/01 PF, PPF, PPF, PPF, PPF, PPF/CONT/01 PP								
Name o Employe	f Employer er's Registration Number	Tanzania Standard Company PPF12345						
				Membe	r's Contribution	Employe	r's Contribution	Total
S/No	Membership Number	Name In Full	Monthly Salary	Rate	Amount	Rate	Amount	Contribution
1	PPF001	Keith Edwards	800 000.00	5.00%	40 000.00	5.00%	40 000.00	80 000.00
2	PPF75315	Precious Smith	400 000.00	5.00%	20 000.00	5.00%	20 000.00	40 000.00
3	PPF1199	Jane Roberts	900 000.00	5.00%	45 000.00	5.00%	45 000.00	90 000.00
		TOTAL	2 100 000.00		105 000.00		105 000.00	210 000.00

Field Description	Explanation		Sage 200 VIP Field Mapping		
Contributions for the month of	Enter the reporting year.	g month and	Report Selection		
Name of	Registered Comp	any Name	From the Main Menu:		
Employer			Click on	Company	
			Click on	Basic Company Information	
			Review	Company Name for Reports	
Employer's	PPF Registration	number of the	From the Main	Menu:	
Registration No	employer. Not in t	he original form.	Click on	Company	
U U		0	Click on	Basic Company Information	
			Click on	Additional Information Tab	
			Review	PPF Number on Additional	
			Info 3 Field		
S/No	Sequential numbe	er			
Membership No	Emplovee's regist	ration number	From the Main	Menu:	
monitorionip ito	with the PPF		Click on	Employee	
			Click on	Change Employee	
			Select	Employee	
			Click on	Statutory Details Tab	
			Review	Number on Tax Office field	
Name in Full	Employee's name	and surname	From the Main	Menu:	
			Click on	Change Employee	
			Select	Employee	
			Review	Employee First Name and	
			Surname		
Field Descriptior	Explanation				
Monthly Salary	The employee's	basic salary.			
Member's Contribu	ution - Rate	The rate is either 5% of the monthly basic salary or 10% in some			
Manakarla Oastalt		instances.			
Member's Contribution - Amount		Show the actual contribution made by the employee. It should be equal to 5% of the monthly salary or 10% if applicable.			

Employer's Contribution - Rate	The rate is either 15% of the monthly basic salary or 10% in some instances.
Employer's Contribution - Amount	Show the actual contribution made by the employer. It should be equal to 15% of the monthly salary or 10% if applicable.
Total Contribution amount	Total contribution equals the employee plus the employer's contributions. 20% of the monthly salary
Total	Show totals of columns: a, b, c and d at the bottom.

#### 6. SDL Half Year Return

	TANZANIA REVENUE AUTHOR	ITY				
	SKILLS AND DEVELOPMENT L	EVY				
	EMPLOYER'S HALF YEAR CERTIF	ICATE				
	YEAR: 2017					
(То	be submitted to the TRA office within 30 days after the end of eacl	h six-month calendar period)				
EMPLOYER'S INF	FORMATION					
TIN:	TIN7531					
Name of Employer:						
	Tanzania Standard Compar	ıy				
Postal Address:						
P.O. Box	Street Posta	al City Dar es Salaam				
Rhusical Address						
Plot Number	1 Block N	umber				
i loc i daniber	2 Sider III					
Street/Location	, , Dar es Salaam,					
Nature of Business:	Service					
State whether an Entity or Individual: Entity						

Field Description	Explanation	Sage 200 VIP Field Mapping			
TIN	The employer's Tax Registration	From the Main Menu:			
	number	Click on	Company		
		Click on	Basic Company Information		
		Review	Tax Registration Number		
Name of Employer	Registered Company Name	From the Main Menu:			
		Click on	Company		
		Click on	Basic Company Information		
		Review	Company Name for Reports		

Postal Address.	Fill in the employer's Postal Box	From the Main	Menu:	
P.O. Box/ City	Number	Click on	Company	
		Click on	Basic Company Information	
		Click on	Address details tab	
		Review	Postal Address details	
Physical Address	Fill in the employer's Physical	From the Main Menu:		
Plot Number	address	Click on	Company	
Block Number		Click on	Basic Company Information	
Street/Location		Click on	Address details tab	
		Review	Physical Address details	
Nature of	Type or general category of			
Business	business the employer belongs to.			
	E.g. Farming, Engineering etc.			
State whether an	The report generated from the			
Entity/Individual	payroll system will always be			
	"Entity".			

# SUMMARY OF GROSS EMOLUMENTS AND TAX PAID DURING THE YEAR

Month	Payment to Permanent Employees TZS	Payment to Casual Employees TZS	Total Gross Emoluments TZS	Amount of SDL paid TZS
January	2 100 000.00	0.00	2 100 000.00	94 500.00
February	2 100 000.00	0.00	2 100 000.00	94 500.00
March	2 100 000.00	0.00	2 100 000.00	94 500.00
April	2 100 000.00	0.00	2 100 000.00	94 500.00
May	2 100 000.00	0.00	2 100 000.00	94 500.00
June	2 100 000.00	0.00	2 100 000.00	94 500.00
TOTAL	12 600 000.00	0.00	12 600 000.00	567 000.00

Field Description	Explanation
Monthly Salary	List months January to December.
Payment to permanent employees	Gross emolument of all full-time/permanent employees. The SDL is based on all taxable earnings plus benefits. Show values for the reporting period only (6 months).
Payment to casual employees	This is referring to all the employees who are not employed on a permanent basis. Part-time, casual and contract workers. Show values for the reporting period only (6 months).
Total Gross emoluments	Calculate the sum of the Gross emoluments paid to the permanent and casual employees. Show values for the reporting period only (6 months).
Amount of SDL paid	Actual SDL paid to the TRA every month of the 6 month reporting period.
Total	Calculate totals for all columns of the table. Show totals for the reporting period only (6 months).

The amount of Gross Emoluments paid during the period from (please tick the appropriate box)						
√	] 1st January to 3	0th June				
	] 1st July to 31st	December				
added up to TZS	12 600	000.00	and 4.5 %	% thereof is		567 000.00
DECLARATION						
I certify that the particu correct.	ulars entered on t	he form SDL	already submitte	ed monthly fo	or the period i	indicated above are
Name of the Employe	r/Paying Officer					
Title:	Mr.		Mrs	Ms		
First Nam	e	1	Middle Name			Surname
Signature and rubber	stamp of the Emp	oloyer/Paying	g Officer			
Date:	Day N 09	IonthY0120	ear 018			
1						

Field Description	Explanation
1st January to 30th June	Select the reporting period.
1st July to 31st December	Select the reporting period.
Added up to TZS	Fill in the sum of the employees' gross emoluments for the reporting period (6 months). Should be equal to the "Total Gross Emoluments" above in the table above.
and 5% thereof is	Fill in the actual total SDL paid for the reporting period (6 months). Should be equal to the "Amount of SDL paid" above in the table above.
Name of the Employer/Paying Officer	Name of the employer's representative who is making the declaration
Title: Mr Mrs Ms	Tick to select the correct title of the person making the declaration.
First Name Middle Name Surname	Fill in the First Name, Middle Name and Surname of the person making the declaration.
Signature and rubber stamp of the Employer/Paying Officer	Signature of the person making the declaration and the company/ business stamp.
Date: Day Month Year	

# 7. SDL Monthly Return

TANZANIA REVENUE AUTHORITY				
SKILI	LS AND DE	EVELOPMENT LE	VY	
	MONT	HLY RETURN		
	YEAR:	2017		
TO:				
EMPLOYER'S INFORMATIC	NC			
TIN: TIN7531				
Name of Employer:				
•	Tanzania Star	ndard Company		
			<b>.</b>	
P.O. Box Street	]	Postal City Daries Sa	alaam	
Physical Address: Plot Number 1	]	Block Number	]	
	]			
Street/Location Dar es Salaa	IM,			
I forward herewith SDL	Return for the	month of January 2017		
EMOLUMENTS A	MOUNTITZS	EMOLUMENTS	AMOUNT/TZS	
Basic pay	2 100 000	Gratuity	0	
Ciek eeu	U	Subsistence Allowance ^j	U	
Deursentia Lieu ef leaud	0	Entertaing Allowance ")	<u>0</u>	
Fayment in Lieu or leave	U	Entertainment Allowance "J		
	0	Annu others Allowances 5)	01	
Commission	0	Any other Allowance *)	0	
Commission Bonus	0	Any other Allowance *) Housing Allowance Subtotal B	0	
Commission Bonus Subtotal A	0	Any other Allowance *) Housing Allowance Subtotal B Grapd Total (A+B)	0 0 0 2 100 000	
Commission Bonus Subtotal A	0 0 2 100 000	Any other Allowance *) Housing Allowance Subtotal B Grand Total (A+B)	0 0 0 2 100 000	
Commission Bonus Subtotal A	0 0 0 2 100 000	Any other Allowance *) Housing Allowance Subtotal B Grand Total (A+B) Whereof SDL at 4.5% amounts to	0 0 2 100 000 94 500	
Commission Bonus Subtotal A Payment made at the Bank I	0 0 2 100 000 Brancł	Any other Allowance *) Housing Allowance Subtotal B Grand Total (A+B) Whereof SDL at 4.5% amounts to	0 0 2 100 000 94 500	
Commission Bonus Subtotal A Payment made at the Bank I Through Payment Slip/Depo	0 0 2 100 000 Brancł osit Sli	Any other Allowance *) Housing Allowance Subtotal B Grand Total (A+B) Whereof SDL at 4.5% amounts to Dated:	0 0 2 100 000 94 500	

Field Description	Explanation	Sage 200 VI	P Field Mapping	
TIN	The employer's Tax Registration	From the Main Menu:		
	number	Click on	Company	
		Click on	Basic Company Information	
		Review	Tax Registration Number	

Name of Employer	Registered Company Name	From the Main Menu:		
		Click on	Company	
		Click on	Basic Company Information	
		Review	Company Name for Reports	
Postal Address.	Fill in the employer's Postal Box	From the Main Menu:		
P.O. Box/ City	Number	Click on	Company	
		Click on	Basic Company Information	
		Click on	Address details tab	
		Review	Postal Address details	
Physical Address	Fill in the employer's Physical	From the Mair	n Menu:	
Plot Number	address	Click on	Company	
Block Number		Click on	Basic Company Information	
Street/Location		Click on	Address details tab	
		Review	Physical Address details	

Field Description	Explanation
SDL Return for the month of20	Select the reporting period.
Emoluments	Header with following listed below: Basic Pay, Leave Pay, Sick Pay, Payment in lieu of leave, Fees Commission and Bonus, etc.
Amounts/TZS	Show total amounts for all employees per emolument listed.
Basic Pay	Basic salary of employee for current period.
Leave Pay	Leave Pay and Allowances for current period.
Sick Pay	Sick pay for current period.
Payment in Lieu of leave	Leave Paid Out for current period.
Fees	Fees paid out in current period.
Commission	Commission paid in current period.
Bonus	Bonuses paid in current period.
Subtotal A	Subtotal A is the sum of all the amounts per emoluments listed above.
Emoluments	Header with following listed below: Gratuity, Subsistence Allowance, Traveling Allowance, Entertainment Allowance, etc.
Amounts/TZS	Show total amounts for all employees per emolument listed.
Gratuity	Gratuity paid in current period
Subsistence Allowance	Subsistence paid in current period
Travelling Allowance	Travel Allowance paid in current period (excluding reimbursive travel - to be included in Other Allowances)
Entertainment Allowance	Entertainment Allowance paid in current period
Any Other Allowance	Any other taxable earning received in current period, e.g. overtime, notice, acting, fuel, lunch, hardship, meals, transport, etc
Housing Allowance	Total value of Housing Allowance paid to employee.
Subtotal B	Subtotal B is the sum of all the amounts per emoluments (excluding emoluments in Sub Total A)
Grand Total (A+B)	Sum of subtotal A and B.
Whereof SDL at 5% amounts to	Enter the total SDL contribution for all employees in the current month.

# 8. WCF Report

		WORKERS COMPENSATION FUND (WO	ATT CF)	TACHMENT	TO FORM No. WCP-1
List of	f amounts contribu	ited for each employee			
Employ	yer's Name:	Tanzania Standard Company			
WCF F	Reg. No. (If available	): WCF12345			
Applica	able Month:	January 2018			
Applica	able Contribution du	ring 2015/16 (1% of gross pay for private entities)			
		(0.5% of gross pay for public entities)			
S/N	Employee ID	Employee Name	Employe Sal	e Basic ary	Employee Gross Salary
1	TZA001	Keith Edwards	5	300 000.00	802 500.00
2	TZA002	Precious Smith	2	400 000.00	408 000.00
3	TZA003	Jane Roberts	9	00.000	905 000.00
Total			2 *	100 000.00	2 115 500.00
Total C	Contributions Due				21 155.00
Emplo I hereb	yer's Authorising	Officer best of my knowledge all particulars in this attachment are	complete, tr	rue and corr	rect.
Signat	ure of Employer:				
Name:					
Positio	Position:				
Date:					
				Υοι	ur Official Stamp

Field Description	Explanation	Sage 200 VIP Field Mapping
Employer's Name	Registered Company Name	From the Main Menu:Click onCompanyClick onBasic Company InformationReviewCompany Name for Reports
WCF Reg. No.	Workers Compensation Fund registration number for the employer	From the Main Menu:Click onCompanyClick onBasic Company InformationClick onAdditional Information TabReviewWCF Reg No on AdditionalInfo 4 Field
Applicable Month	Select the reporting period.	
S/No	Sequential number, e.g. 1, 2, 3 ect.	
Employee ID	Employee's payroll reference no	Employee Code
Employee Name	Employee's first name, second name and surname	From the Main Menu:Click onEmployeeClick onChange EmployeeSelectEmployee

		Review Employee Names and Surname
Employee Basic Salary	Employee's actual monthly basic salary	
Employee Gross Salary	Employee's total cash earnings for the month, including the basic salary. "wages, salary, leave pay, sick pay, payment in lieu of leave, fees, commission, bonus and any other allowances paid to the employee by the employer".	<ul> <li>Total Earnings excluding the following Earning Types when Report Setup is done:</li> <li>Reimbursements</li> <li>Savings Paid Out</li> <li>Loans Paid Out</li> <li>Rounding</li> </ul>
Total	Show totals at the bottom of the Employee's Basic Salary and the Employee's Gross Salary columns.	
Total Cotribution	Total contribution due for private sector employers is 1% of the total Employee's Gross Salary above, 0.5% for public sector employers. Payable only by the employer on a monthly basis.	Company Contribution Total on Payslip Screen for Workmen's Compensation Fund

#### 9. WCF Online Submission

An Excel file is created which can be used for online submission purposes: **Tanzania WCF Online Submission:** 

<b>⊟</b> 5∙	°° <b>∆</b> =			wcf_em	ployees_sample	(004).xlsx [Read-(	Only] - Excel Esterhu	izen, Yolandi			×
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Paste	Calibri B I U -	• 11 • A	▲ = =	<b>_ %</b> ∙ ≡ <b>⊡ ∃</b>	eb Num	ber % * €.0 .0	<ul> <li>The conditional Formatting *</li> <li>Format as Table *</li> <li>Cell Styles *</li> </ul>	Erinsert 🔹	∑ · A Z · Z · Sort & Filter ·	Find & Select *	
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G7	• : × .	f <sub>x</sub>									~
A	В	С	D	E F	G	н	1	J	K L	M	-
1 firstname 2	middlename	lastname	gender de	ob basicpa	y grosspay	job_title	employment_category				

Field Description	Explanation	Sage 200 VIF	P Field Mapping
Firstname	First name of the employee	From the Main Click on Click on Select Review	Menu: Employee Change Employee Employee Employee First name
Middlename	Middle name of the employee	From the Main Click on Click on Select Review	Menu: Employee Change Employee Employee Employee Second name

		-	
Lastname	Surname of the employee	From the Ma	in Menu:
Laothanio		Click on	Employee
		Click on	Change Employee
		Select	Employee
		Boviow	Employee Surnama
		Review	Employee Sumame
0		From the Ma	in Menu:
Gender	Male or Female	Click on	Employee
		Click on	Change Employee
		Coloct	Employee
		Select	Employee
		Review	Gender
		Erom the Ma	in Monu:
Dob	Employee date of birth in		
	DD/MM/YYYY format	Click on	Employee
	DD/WW/TTTTTTOTMAC	Click on	Change Employee
		Select	Employee
		Review	Date of Birth
Basicpay	Contractual salary per month	Selected whe	en Report Setup is done
. ,	51		
Grosspay	Contractual monthly salary PLUS all	Selected whe	en Report Setup is done
	fixed allowances which are regularly		
	lixed allowances which are regularly		
	paid (e.g transport, housing and fuel		
	allowances)		
iob title	Current Job Title of Employee	From the Ma	in Menu:
,···_····		Click on	Employee
		Click on	Change Employee
		Select	Employee
		Click on	Analysis Details
		Poviow	Job Titlo
employment_cate	Temporary / Part Time / Contract	From the Ma	
dory		Click on	Employee
gory		Click on	Change Employee
		Select	Employee
		Review	Group
			0.000
		User to enter	following values:
		P for Pormar	ent Tfor Temporary C for
		Contract	ient, i for remporary, C for
		Contract	

### 10. WCR-3 Report

		E	MPLO	VER'S	RETURN	OF EARN	INGS			j¥CR-3
				-		-				
			ţ2	wade un	aer segular	ide 14(1))				
1. 1	me of employer									
2. V	WCF Reg, No									
3. F	Period/year covered (o	2.9, 2016/2	017)							
4. N	Name (s) and addresse	s includin	e physic	cal addr	esses of bra	nches of th	e same bus	siness ope	rated by the em	ployer
5. C	and number of employ Category of employees	ees of each	h branc	li (provi	ide relevan	t attachm	enta)			
S/Ne	Category of		Num	ber of E	mployees		To	tal	1	
·	Employees based on the Contract of	Previou	Male 1 Ci	urrent	Ferr Previou	Curre	Previo	Curre		
	Employment	ycar	1	scar	a year	nt	us vcar	nt		
1.	Permanent (Uncreasified pariod)		+						1	
	of time)								1	
2	1 CHEDORITY								4	
	(Specified period of									
3. 6. F d	(Specified period of time) Specific task Particulars of each em the example below	ployee for	differe	ni categ	ories of emp	nloyees ma	y be provid	ied as an :	attachment as	shown in
3. 6. F g S/No.	(Specified period of time) Specific task Particulars of each em the example below Name	playee for En Age	differer aployee Sex	nt categ c partic Job t	aries of emp ulara itle	Annual c (amounta	y be provid arnings )	ied as an :	attachment as	shown in
3. 6. F d S/No. A.	(Specified period of fime) Specific took Particulars of each emp he example below Name Permanent employees (Unspecified perio	ployee for En Age	differer nploves Sex	nt categ c partic Job t	ories of emp ulara itle	Annual c (amounts	y be provid arnings )	ded as an :	attachment as	shown in
3. 6. F d \$Ne. A.	(Specified period of fime) Specific tok Particulars of each em he example below Name Permanent employees (Unspecified period of time) John Gbudu	ployee for En Age d	differe aploves Sex M	nt categ c partic Job t Elect	aries of emp ulara itle	Annual c (amounts 24,000,00	y be provid arnings	ied as an :	attachment its	showa in
3. 6. 1 3.No. A. B.	(Specified period of fine) Specific tok Particulars of each emp he example below Name Permanent employees (Unspecified period of fine) John (Dock) Temporary employees (Specific ereid of fine)	ployee for En Age d 26	differen nploven Sex M	nt categ c partic Job t Elect engin	ories of enq ulars itle cer	Annual c (amounts 24,000,00	y be provid arminga ))	ded as an :	attachment as	shown in
3. 6. I 6 5/Ne. A. B.	(Specified period of fime) Specific took Particulars of each em he example below Name Permanent employees (Unopecified period of fime) John Gbecks Temporary employees (Specific period of fime) Irene George	al and a set of the se	differe nglove Sex M	nt categy partic Job t Elect engin	nies of emp ulars itle rical cor	Annual c (amounts 24,000,00 36,000,00	y be provid arnings ) 0	derl as un :	attachment as	shown in
3. 5. 1 5.No. A. B.	(Specified period of fine) Specific tok Particulars of each em he example below Name Permanent employees (Unopecified period of fime) John Goeda Temporary employees Specific Task employees	d 26	differe splove Sex M	nt categ partic Job t Electi engin Asses	nries of enq ulars itile rical cer	Annual c (amounts 24,000,00 36,000,00	y be provid arnings ) 0	ded as an :	attachment as	shown in

#### Attachment

	EMPLOYEE'S PARTICULARS									
S/N	First Name	Middle Name	Last Name	Date of Birth	Sex	Job Title	Employment Category(Permanent, temporary, contract)	Annual Basic Salary	Annual allowance	WCF employee Unique No*

Field	Explanation	Sage 200 VIP Field Mapping
Description		
Name of employer	Name of the employer	From the Main Menu:
		Click on Company
		Click on Basic Company Information
		Review Company Name for Reports
WCF Reg. NO	WCF Registration number	
		Click on Company
		Click on Basic Company Information
		Click on Additional Information Tab
		Info 4 Field
Poriod/voar	Poparting pariod starts from 1	Processing period Vear value
covered (e.g.	March to 28 February So for the	Report has to be printes in February or
2019/2020)	vear ending 28 February 2020 it will	March
2019/2020)	show 2019/2020	
Name (s) and	Employer to attach a list of the	
addresses	information required	
including physical		
addresses of		
branches of the		
same business		
operated by the		
employer and		
number of		
employees of each		
branch (provide		
relevant		
attachments)		
	Only totals are required	
	Any employee who was active in	
	that period, including new	
Category of	engagements during the period and	
employees	terminations during the period,	
	should be included	
	(See below)	
Particulars of	See below	
each employee for		
aitterent		
categories of		
employees are		
provided as an		
attacnment.		

# Category of employees:

Field	Explanation	Sage 200 VIP Field Mapping
Description		
S/No	Sequential number i.e. 1, 2 and 3	Report Selection
Category of Employees based on the Contract of Employment	There are 3 categories of employees: <b>Permanent</b> , <b>Temporary</b> and <b>Specific task</b> .	From the Main Menu: Click on Employee Click on Change Employee Select Employee Review Group User to enter following values: P for Permanent, T for Temporary, C for Contract
Permanent (Unspecified period of time)	Employees who are employed on a full time basis. For this category of employees, show the total number of <b>Male</b> and <b>Female</b> employees in the <b>current year</b> and <b>previous year</b> . Also show the <b>total</b> number of employees for <b>this year</b> and <b>last</b> <b>year</b> . As shown in the table provided in the sample.	Headcount per Group field P and per Gender field and populated in Current Year fields on report.
Temporary (Specified period of time)	Part-time employees who have a fixed term contract of employment. For this category of employees, show the total number of <b>Male</b> and <b>Female</b> employees in the <b>current year</b> and <b>previous year</b> . Also show the <b>total</b> number of employees for <b>this year</b> and <b>last</b> <b>year</b> . As shown in the table provided in the sample.	Headcount per Group field T and per Gender field and populated in Current Year fields on report.
Specific task	Employees who are employed to complete a specific task. For this category of employees, show the total number of <b>Male</b> and <b>Female</b> employees in the current and <b>previous year</b> . Also show the total number of employees for <b>this</b> <b>year</b> and <b>last year</b> . As shown in the table provided in the sample.	Headcount per Group field C and per Gender field and populated in Current Year fields on report.

# Employee's particulars:

Field Description	Explanation	Sage 200 VIP Field Mapping
S/N	Sequential number i.e. 1, 2, 3 etc	
First Name	First name of the employee	From the Main Menu:Click onEmployeeClick onChange EmployeeSelectEmployeeReviewEmployee First Name
Middle Name	Middle name of the employee	From the Main Menu: Click on Employee Click on Change Employee Select Employee Review Employee Second name
Last Name	Surname of the employee	From the Main Menu:Click onEmployeeClick onChange EmployeeSelectEmployeeReviewEmployee Surname
Date of Birth	Employee date of birth in <b>DD/MM/YYYY</b> format	From the Main Menu:Click onEmployeeClick onChange EmployeeSelectEmployeeReviewDate of Birth
Sex	Gender of the employee i.e. Male or Female	From the Main Menu:Click onEmployeeClick onChange EmployeeSelectEmployeeReviewGender
Job Title	Current Job title of the employee	From the Main Menu:Click onEmployeeClick onChange EmployeeSelectEmployeeClick onAnalysis DetailsReviewJob Title
Employment Category(Permane nt, temporary, contract)	State whether employee is <b>Permanent, Temporary</b> or on <b>Contract</b>	From the Main Menu:Click onEmployeeClick onChange EmployeeSelectEmployeeReviewGroup
Annual Basic Salary	The actual basic salary of the employee for the period starting 1 March to 28 February of the following year.	Selected when Report Setup is done

Annual allowance	Any other cash allowances which the WCF contribution was based on earned by the employee for the period starting 1 March to 28	Selected when	Report Setup is done
WCF employee Unique No	February of the following year. WCF number of the employee *Please note: WCF member employee unique number will be generated by the Fund after	From the Main M Click on Click on Select Click on	Menu: Employee Change Employee Employee Statutory Details
	* <b>Please note:</b> WCF member employee unique number will be generated by the Fund after submission of the returns.	Click on Select Click on Review	Change Employee Employee Statutory Details Sundry Number 2 field

#### 11. LAPF 10 Report

		TH	E UNITE	D REPL	JBLIC OF T	ANZANIA			
		THE	OCAL A	UTHOR	TIES PENS	IONS FUND	)		
Cont	ributing Empl	oyer's N	MEMBER	S CON	TRIBUTION	FORM			
age	No:				Cheque No				
Cont Depa Mont Zona Issue	ributing Empl artment Code th of Contribu I/Regional/Di ed by:	oyer's C No.: tion: strict Co	ode No.:	Ye	Date of Cl Amount: sar: Date of F	heque	o.:		
Cont Depa Mont Zona	ributing Empl artment Code th of Contribu I/Regional/Di ed by:	oyer's C No.: tion: strict Co	ode No.:		Date of C Amount: sar: Date of F  Statutory (	neque	0.: Supplement	tary / Other	
lont lona ssue	ributing Empl artment Code th of Contribu Il/Regional/Di ed by: Membership No.	Oyer's C No.: tion: strict Co Check No.	de No.: Member Name	Basic Selary	Date of Cl Amount: ear: Date of F  Statutory 4 Employer's Contributio a (15%)	Accept N Accept: Contribution Employees Contribution (596)	Supplement Contri Employer's Contribution (%)	tary / Other butions Employees Contribution (_%)	Total
iont Xepa Iont Cona ssue	ributing Empl artment Code th of Contribu Il/Regional/Di ed by: ed by: Membership No.	Oyer's C No.: tion: strict Co Oheck No.	de No.: de No.: Member Nome	Basic Salary	Date of Cl Amount: sar: Date of F Statutory ( Employer's Contributory) = (15%)	Contribution	Supplemens Contri Engloyer's Contribution (_%)	tary / Other butions Employees Contribution (_%)	Total
iont Nepa Iont Iona Iona Iona	ributing Empl artment Code th of Contribu I/Regional/Di ed by: ed by: Membership No.	Over's C No.: tion: strict Co Oveck No.	Inde No.:	Basic Salary	Date of Cl Amount: an: Date of F  Statutory 1 Employer's Contributio a (15%)	Receipt N leceipt: Contribution Employees Contribution (5%)	0.: Supplemess Contribution Contribution (%)	tary / Other butions Employees Contribution (_%)	Total
iont lont cona ssue	ributing Empl artment Code th of Contribu Il/Regional/Di ed by: Membership No.	Check	de No.:	Basic Salary	Date of Cl Amount: sar: Date of F  Statutory ( Employer's Contributory) a (15%)	Contribution	Supplemens Contri Engloyer's Contribution (%)	tary / Other butions Employees Contribution (_%)	Total
iont lona ssue	ributing Empl artment Code th of Contribu I/Regional/Di ed by: Membership No.	Check No.	de No.:	Basic Selary	Date of Cl Amount: ar: Date of F  Statutory 1 Employer's Contributio n (15%)	Receipt N leceipt: Contribution Employees Contribution (5%)	0.: Supplements Contribution (%)	tary / Other butions Employees Contribution (_%)	Total
Sont Control C	ributing Empl artment Code th of Contribu (/Regional/Di ed by: 	Check	Member	Basic Salary	Date of Cl Amount: sar: Date of F Statutory 1 Employer's Contributio a (15%)	Contribution	0.: Supplement Contribution (%)	tary / Other buttons Employees Contribution (_%)	Total
Cont Depa Mont Zona Issue	ributing Empl artment Code th of Contribu (/Regional/Di ed by: Membership No.	Check No.:	de No.:	Basic Salary	Date of Cl Amount: sar: Date of F Statutory 1 Employer's Contributio n (15%)	Date:	0.: Supplements Contribution Contribution (%)	tary / Other butions Employees Contribution (_%)	Total

Field	Explanation	Sage 200 VIP Field Mapping
Description		
Contributing	Registered Company Name	From the Main Menu:
Employer's Name:		Click on Company
		Click on Basic Company Information
		Review Company Name for Reports
Address:	Physical address of the employer	From the Main Menu:
		Click on Company
		Click on Basic Company Information
		Click on Address details tab
		Review Physical Address details
Page No :	Show the total number of pages in this report	
	Lleer to fill in menuelly	
Cheque No		
	The employer's reference number	
Employer's Code	with the LAPF	Click on Company
NO.:		Click on Basic Company Information
		Click on Additional Information Tab
		Review WCF Reg No on Additional
		Into 5 Field
Date of cheque:	User to fill in manually	
	The code indicating the department	
Department Code	under which the employers is	
No.:	registered under.	
	The total contributions by the	Selected when Report Setup is done
	employee and employer for the	
Amount:	period. Sum of the total column.	
Month of	State the contribution month and	Processing period month
Contribution:	year e.g. November	
Year:	State the contribution year e.g. 2019	Processing period year
Receipt No.:	User to fill in manually	
Zonal/Regional/dis	Zone/Region/District in which the	
trict Code no.:	employer is registered under.	
Date of Receipt:	User to fill in manually	
Issued by:	User to fill in manually	

Field Description	Explanation
No.	Show sequential numbering
Membership No.	The employee's membership number with the LAPF
Check No.	The employee's reference number with the employer e.g. payroll number / employee code.
Member name	Name and surname of the employee
Basic salary	Employee's current basic salary. Show total at the end of the column.

Statutory contribution - Employer's contribution (15%)	The employer's mandatory contribution for the current month. Show total at the end of the column.
Statutory contribution - Employees contribution (5%)	The employee's mandatory contribution for the current month. Show total at the end of the column.
Supplementary / Other Contributions - Employer's contribution (%)	The employer's additional/supplementary contribution for the current month; any other contribution other than the 15%. Show total at the end of the column.
Supplementary / Other Contributions - Employees contribution (%)	The employee's additional/supplementary contribution for the current month; any other contribution other than the 5%. Show total at the end of the column.
Total	The sum of the statutory and the supplementary/other contributions made by both the employee and employer. Show total at the end of the column.

# 12. PSSSF Report

Employers Name Address TIN No Contribution for the Month of										
National ID No.	Membership No.	Employer No.	First Name	Middle Name	Sur Name	Salary	Employer's Contribution	Member's Contribution	Additional (if available)	Total

Field Description	Explanation	Sage 200 V	VIP Field Mapping		
Employers Name	ame Business name of the employer		From the Main Menu:		
		Click on	Company		
		Click on	Basic Company Information		
		Review	Company Name for Reports		
Address	Business address of the employer	From the Main Menu:			
		Click on	Company		
		Click on	Basic Company Information		
		Click on	Address details tab		
		Review	Physical Address details		
TIN No.	Tax Identification Registration		From the Main Menu:		
	number of the employer	Click on	Company		
		Click on	Basic Company Information		
		Review	Tax Registration Number		
Contribution for	Enter the reporting month and year.	Processing Period month and year			
the month of	E.g. January 2020				

		From the Main Menu:		
		Click on Employee		
		Click on	Employee	
National ID No.	Identification number of the	Click on	Change Employee	
National ID NO.	employee	Select	Employee	
	National ID Number has minimum	Click on	Statutory Details	
		Review	Sundry Number 4 field	
	length of 23 characters.	Or		
		Details	ID number on Personal	
		From the Main Menu:		
		Click on	Employee	
		Click on	Change Employee	
Membership No.	Employee's registration number with	Select	Employee	
	the PSSSF	Click on	Statutory Details	
		Review	Sundry Number 3 field	
Employer No.	Employee Code			
		From the Main	Menu:	
		Click on	Employee	
First Name	First name of employee	Click on	Change Employee	
		Select	Employee	
		Review	Employee First Name	
		From the Main Menu:		
	Middle name of the employee if	Click on	Employee	
Middle Name	Middle name of the employee, if	Click on	Change Employee	
	applicable	Select	Employee	
		Review	Employee Second name	
		From the Main	Menu:	
Currence	Surrama of the employee	Click on	Employee	
Sumame	Sumarie of the employee	Click on	Change Employee	
		Select	Employee	
		Review	Employee Surname	
Salary	Monthly Salary Amount PSSSF	Selected when	Report Setup is done	
	contribution is based on			
Employaria	Chaw the estual contribution mode	Selected when	Report Setup is done	
	Employer's Snow the actual contribution made			
Contribution	by the employer. It should be equal			
	to 15% of the monthly salary or			
	whichever ration was used.			
Member's	Show the actual contribution made	Selected when Report Setup is done		
Contribution	ntribution by the employee It should be equal			
- JILLINGUUU	to E0/ of the monthly colory or			
	to 5% of the monthly salary or			
	whichever ration was used.	Colooted where	Papart Satur is dass	
Additional( if	Voluntary contributions, if any.	Selected when	Report Setup is done	
available)				
Total	Show totals of columns: a, b and c.			