GOMBE STATE GOVERNMENT

GOMBE STATE INTERNAL REVENUE SERVICE

Bauchi Road, P.M.B 22, Gombe

irsgombe@gmail.com

Form G (Schedule of PAYE Remittances) 20……

Deductions were made and remitted in the preceding year

Name of Employer: …….

Address of Employer: …….

S/NO	Month of the Year	Amount Remitted	Receipt No.

Name of Head of Organization...……

Signature…….

Date……..

NB. Please, attach evidence of payment or photocopies of receipts for ease of authentication.