

EMPLOYER J & B Excavating Ltd.

## SOCIAL SECURITY BOARD MONTHLY REMITTANCE FORM

FOR THE MONTH OF

EMPLOYER'S  
REGISTRATION  
NUMBER 7020

January-10

Employee's Registration Number	NAMES OF EMPLOYEES	SEX	EARNINGS AND CONTRIBUTION					Total Earnings for Month	Total 8 1/2% Contribution	No. of Weeks Worked	COMMENTS	
				Week No. 1	Week No. 2	Week No. 3	Week No. 4					Week No. 5 or Monthly Salary
77700	Jameal Ben	M	Earnings	\$600.00	\$700.00	\$500.00	\$1,000.00	\$	\$2,800.00	\$209.53	4	
			Employee 4%	\$24.00	\$27.30	\$20.00	\$27.30	\$				
			Employer 4 1/2%	\$27.00	\$30.71	\$22.50	\$30.71	\$				
77129	Triston Carl	M	Earnings	\$400.00	\$650.00	\$400.00	\$700.00	\$	\$2,150.00	\$181.26	4	
			Employee 4%	\$16.00	\$26.00	\$16.00	\$27.30	\$				
			Employer 4 1/2%	\$18.00	\$29.25	\$18.00	\$30.71	\$				
			Earnings	\$	\$	\$	\$	\$				
			Employee 4%	\$	\$	\$	\$	\$				
			Employer 4 1/2%	\$	\$	\$	\$	\$				
			Earnings	\$	\$	\$	\$	\$				
			Employee 4%	\$	\$	\$	\$	\$				
			Employer 4 1/2%	\$	\$	\$	\$	\$				
			Earnings	\$	\$	\$	\$	\$				
			Employee 4%	\$	\$	\$	\$	\$				
			Employer 4 1/2%	\$	\$	\$	\$	\$				
<b>TOTALS</b>							\$4,950.00	\$390.79				

I certify that the above contributions are due in respect of the employees listed, for the periods shown and I enclose Cheques/cash in payment.

Signature of Employer \_\_\_\_\_

Date \_\_\_\_\_

Surcharge (5% Total Contributions)

**GRAND TOTALS**

\$4,950.00

\$390.79

**OFFICIAL USE ONLY**

Cashier _____	Receipt No. _____	Date _____	Verified _____
Posted _____	Date _____	Checked _____	

**CHEQUE NUMBER**

First Caribbean 5792

EMPLOYER Marsha's Elegant Designs

## SOCIAL SECURITY BOARD MONTHLY REMITTANCE FORM

FOR THE MONTH OF

EMPLOYER'S  
REGISTRATION  
NUMBER 6805

January-10

Employee's Registration Number	NAMES OF EMPLOYEES	SEX	EARNINGS AND CONTRIBUTION					Total Earnings for Month	Total 8 1/2% Contribution	No. of Weeks Worked	COMMENTS	
				Week No. 1	Week No. 2	Week No. 3	Week No. 4					Week No. 5 or Monthly Salary
58903	Faron Pierre Dumas	F	Earnings	\$	\$500.00	\$	\$700.00	\$	\$1,200.00	\$102.00	4	
			Employee 4%	\$	\$20.00	\$	\$28.00	\$				
			Employer 4 1/2%	\$	\$22.50	\$	\$31.50	\$				
80590	Vincia Baby	F	Earnings	\$	\$700.00	\$	\$700.00	\$	\$1,400.00	\$119.00	4	
			Employee 4%	\$	\$28.00	\$	\$28.00	\$				
			Employer 4 1/2%	\$	\$31.50	\$	\$31.50	\$				
80958	Marsha Willan	F	Earnings	\$	\$1,500.00	\$	\$1,500.00	\$	\$3,000.00	\$232.05	4	
			Employee 4%	\$	\$54.60	\$	\$54.60	\$				
			Employer 4 1/2%	\$	\$61.43	\$	\$61.43	\$				
			Earnings	\$	\$	\$	\$	\$				
			Employee 4%	\$	\$	\$	\$	\$				
			Employer 4 1/2%	\$	\$	\$	\$	\$				
			Earnings	\$	\$	\$	\$	\$				
			Employee 4%	\$	\$	\$	\$	\$				
			Employer 4 1/2%	\$	\$	\$	\$	\$				
<b>TOTALS</b>							<b>\$5,600.00</b>	<b>\$453.05</b>				

I certify that the above contributions are due in respect of the employees listed, for the periods shown and I enclose cheque/cash in payment.

Signature of Employer \_\_\_\_\_

Date \_\_\_\_\_

Surcharge (5% Total Contributions)

**GRAND TOTALS** \$5,600.00 \$453.05  

**OFFICIAL USE ONLY**

Cashier _____	Receipt No. _____	Date _____	Verified _____
Posted _____	Date _____	Checked _____	

**CHEQUE NUMBER**

First Bank 964

EMPLOYER Fahie's Animal Farm

## SOCIAL SECURITY BOARD MONTHLY REMITTANCE FORM

FOR THE MONTH OF

EMPLOYER'S  
REGISTRATION  
NUMBER 6804

February-10

Employee's Registration Number	NAMES OF EMPLOYEES	SEX	EARNINGS AND CONTRIBUTION					Total Earnings for Month	Total 8 1/2% Contribution	No. of Weeks Worked	COMMENTS	
				Week No. 1	Week No. 2	Week No. 3	Week No. 4					Week No. 5 or Monthly Salary
96309	Wilna F. Coburn	F	Earnings	\$1,250.00	\$	\$1,250.00	\$	\$1,250.00	\$3,750.00	\$318.75	6	
			Employee 4%	\$50.00	\$	\$50.00	\$	\$50.00				
			Employer 4 1/2%	\$56.25	\$	\$56.25	\$	\$56.25				
85090	Barry Edward	M	Earnings	\$1,400.00	\$	\$1,000.00	\$	\$1,300.00	\$3,700.00	\$311.53	6	
			Employee 4%	\$54.60	\$	\$40.00	\$	\$52.00				
			Employer 4 1/2%	\$61.43	\$	\$45.00	\$	\$58.50				
			Earnings	\$	\$	\$	\$	\$				
			Employee 4%	\$	\$	\$	\$	\$				
			Employer 4 1/2%	\$	\$	\$	\$	\$				
			Earnings	\$	\$	\$	\$	\$				
			Employee 4%	\$	\$	\$	\$	\$				
			Employer 4 1/2%	\$	\$	\$	\$	\$				
			Earnings	\$	\$	\$	\$	\$				
			Employee 4%	\$	\$	\$	\$	\$				
			Employer 4 1/2%	\$	\$	\$	\$	\$				

I certify that the above contributions are due in respect of the employees listed, for the periods shown and I enclose cheque/cash in payment.

Signature of Employer \_\_\_\_\_

Date \_\_\_\_\_

**TOTALS**

\$7,450.00

\$630.28

Surcharge (5% Total Contributions)

**GRAND TOTALS**

\$7,450.00

\$630.28

**OFFICIAL USE ONLY**

Cashier _____	Receipt No. _____	Date _____	Verified _____
Posted _____	Date _____	Checked _____	

**CHEQUE NUMBER**

First Bank 815

EMPLOYER Frett's Banking Services

## SOCIAL SECURITY BOARD MONTHLY REMITTANCE FORM

FOR THE MONTH OF

EMPLOYER'S  
REGISTRATION  
NUMBER 6020

March-10

Employee's Registration Number	NAMES OF EMPLOYEES	SEX	EARNINGS AND CONTRIBUTION					Total Earnings for Month	Total 8 1/2% Contribution	No. of Weeks Worked	COMMENTS	
				Week No. 1	Week No. 2	Week No. 3	Week No. 4					Week No. 5 or Monthly Salary
67000	Lena Cheque	F	Earnings	\$	\$	\$	\$	\$11,000.00	\$11,000.00	\$251.39	4	
			Employee 4%	\$	\$	\$	\$	\$118.30				
			Employer 4 1/2%	\$	\$	\$	\$	\$133.09				
78959	Lisa Savings	F	Earnings	\$	\$	\$	\$	\$2,500.00	\$2,500.00	\$212.50	4	
			Employee 4%	\$	\$	\$	\$	\$100.00				
			Employer 4 1/2%	\$	\$	\$	\$	\$112.50				
76593	Dezarre Wood	F	Earnings	\$	\$	\$	\$	\$3,500.00	\$3,500.00	\$251.39	4	
			Employee 4%	\$	\$	\$	\$	\$118.30				
			Employer 4 1/2%	\$	\$	\$	\$	\$133.09				
68555	Barry Teller	M	Earnings	\$	\$	\$	\$	\$2,800.00	\$2,800.00	\$238.00	4	
			Employee 4%	\$	\$	\$	\$	\$112.00				
			Employer 4 1/2%	\$	\$	\$	\$	\$126.00				
			Earnings	\$	\$	\$	\$	\$				
			Employee 4%	\$	\$	\$	\$	\$				
			Employer 4 1/2%	\$	\$	\$	\$	\$				
<b>TOTALS</b>							<b>\$19,800.00</b>	<b>\$953.28</b>				

I certify that the above contributions are due in respect of the employees listed, for the periods shown and I enclose cheque/cash in payment.

Signature of Employer \_\_\_\_\_

Date \_\_\_\_\_

Surcharge (5% Total Contributions)

**GRAND TOTALS**

\$19,800.00	\$953.28	
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**OFFICIAL USE ONLY**

Cashier _____	Receipt No. _____	Date _____	Verified _____
Posted _____	Date _____	Checked _____	

**CHEQUE NUMBER**

Scotia 530
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EMPLOYER Lisa's Icecream Parlour

**SOCIAL SECURITY BOARD  
MONTHLY REMITTANCE FORM**

FOR THE MONTH OF

EMPLOYER'S  
REGISTRATION  
NUMBER 6000

April-10

Employee's Registration Number	NAMES OF EMPLOYEES	SEX	EARNINGS AND CONTRIBUTION					Total Earnings for Month	Total 8 1/2% Contribution	No. of Weeks Worked	COMMENTS	
				Week No. 1	Week No. 2	Week No. 3	Week No. 4					Week No. 5 or Monthly Salary
69854	Peter Pistachio	M	Earnings	\$200.00	\$500.00	\$250.00	\$300.00	\$325.00	\$1,575.00	\$133.88	5	
			Employee 4%	\$8.00	\$20.00	\$10.00	\$12.00	\$13.00				
			Employer 4 1/2%	\$9.00	\$22.50	\$11.25	\$13.50	\$14.63				
78569	Mary Cherryvanilla	F	Earnings	\$650.00	\$650.00	\$650.00	\$650.00	\$700.00	\$3,300.00	\$279.01	5	
			Employee 4%	\$26.00	\$26.00	\$26.00	\$26.00	\$27.30				
			Employer 4 1/2%	\$29.25	\$29.25	\$29.25	\$29.25	\$30.71				
48693	Susan Chocolate	F	Earnings	\$400.00	\$300.00	\$350.00	\$300.00	\$425.00	\$1,775.00	\$150.88	5	
			Employee 4%	\$16.00	\$12.00	\$14.00	\$12.00	\$17.00				
			Employer 4 1/2%	\$18.00	\$13.50	\$15.75	\$13.50	\$19.13				
			Earnings	\$	\$	\$	\$	\$				
			Employee 4%	\$	\$	\$	\$	\$				
			Employer 4 1/2%	\$	\$	\$	\$	\$				
			Earnings	\$	\$	\$	\$	\$				
			Employee 4%	\$	\$	\$	\$	\$				
			Employer 4 1/2%	\$	\$	\$	\$	\$				

I certify that the above contributions are due in respect of the employees listed, for the periods shown and I enclose cheque/cash in payment.

**TOTALS**    \$6,650.00    \$563.76

Signature of Employer \_\_\_\_\_

Surcharge (5% Total Contributions)

Date \_\_\_\_\_

**GRAND TOTALS**    \$6,650.00    \$563.76

**OFFICIAL USE ONLY**

Cashier _____	Receipt No. _____	Date _____	Verified _____
Posted _____	Date _____	Checked _____	

**CHEQUE NUMBER**

First Caribbean 5345

EMPLOYER Woodley Trust Services

**SOCIAL SECURITY BOARD  
MONTHLY REMITTANCE FORM**

FOR THE MONTH OF

EMPLOYER'S  
REGISTRATION  
NUMBER 6030

January-10

Employee's Registration Number	NAMES OF EMPLOYEES	SEX	EARNINGS AND CONTRIBUTION					Total Earnings for Month	Total 8 1/2% Contribution	No. of Weeks Worked	COMMENTS	
				Week No. 1	Week No. 2	Week No. 3	Week No. 4					Week No. 5 or Monthly Salary
80395	Dezerra Fudicary	F	Earnings	\$	\$2,100.00	\$	\$2,100.00	\$	\$4,200.00	\$251.39	4	
			Employee 4%	\$	\$59.15	\$	\$59.15	\$				
			Employer 4 1/2%	\$	\$66.54	\$	\$66.54	\$				
80592	Roy Investment	F	Earnings	\$	\$1,250.00	\$	\$1,250.00	\$	\$2,500.00	\$212.50	4	
			Employee 4%	\$	\$50.00	\$	\$50.00	\$				
			Employer 4 1/2%	\$	\$56.25	\$	\$56.25	\$				
80949	Lisa Stocks	F	Earnings	\$	\$1,350.00	\$	\$1,200.00	\$	\$2,550.00	\$216.75	4	
			Employee 4%	\$	\$54.00	\$	\$48.00	\$				
			Employer 4 1/2%	\$	\$60.75	\$	\$54.00	\$				
81234	Yvonne Bonds	F	Earnings	\$	\$2,900.00	\$	\$2,500.00	\$	\$5,400.00	\$251.39	4	
			Employee 4%	\$	\$59.15	\$	\$59.15	\$				
			Employer 4 1/2%	\$	\$66.54	\$	\$66.54	\$				
			Earnings	\$	\$	\$	\$	\$				
			Employee 4%	\$	\$	\$	\$	\$				
			Employer 4 1/2%	\$	\$	\$	\$	\$				
<b>TOTALS</b>							\$14,650.00	\$932.03				

I certify that the above contributions are due in respect of the employees listed, for the periods shown and I enclose cheque/cash in payment.

Signature of Employer \_\_\_\_\_

Date \_\_\_\_\_

Surcharge (5% Total Contributions)

**GRAND TOTALS** \$14,650.00 \$932.03

**OFFICIAL USE ONLY**

Cashier _____	Receipt No. _____	Date _____	Verified _____
Posted _____	Date _____	Checked _____	

**CHEQUE NUMBER**

First Bank 973

EMPLOYER L & L Catering

## SOCIAL SECURITY BOARD MONTHLY REMITTANCE FORM

FOR THE MONTH OF

EMPLOYER'S REGISTRATION NUMBER 6081

January-10

Employee's Registration Number	NAMES OF EMPLOYEES	SEX	EARNINGS AND CONTRIBUTION					Total Earnings for Month	Total 8 1/2% Contribution	No. of Weeks Worked	COMMENTS	
			Week No. 1	Week No. 2	Week No. 3	Week No. 4	Week No. 5 or Monthly Salary					
78956	Lelia Cook	M	Earnings	\$725.00	\$725.00	\$725.00	\$725.00	\$	\$2,900.00	\$232.05	4	
			Employee 4%	\$27.30	\$27.30	\$27.30	\$27.30	\$				
			Employer 4 1/2%	\$30.71	\$30.71	\$30.71	\$30.71	\$				
78560	Cindy Mark	F	Earnings	\$250.00	\$400.00	\$300.00	\$200.00	\$	\$1,150.00	\$97.75	4	
			Employee 4%	\$10.00	\$16.00	\$12.00	\$8.00	\$				
			Employer 4 1/2%	\$11.25	\$18.00	\$13.50	\$9.00	\$				
78693	Veronica Cook-Dish	F	Earnings	\$300.00	\$300.00	\$300.00	\$300.00	\$	\$1,200.00	\$102.00	4	
			Employee 4%	\$12.00	\$12.00	\$12.00	\$12.00	\$				
			Employer 4 1/2%	\$13.50	\$13.50	\$13.50	\$13.50	\$				
			Earnings	\$	\$	\$	\$	\$				
			Employee 4%	\$	\$	\$	\$	\$				
			Employer 4 1/2%	\$	\$	\$	\$	\$				
			Earnings	\$	\$	\$	\$	\$				
			Employee 4%	\$	\$	\$	\$	\$				
			Employer 4 1/2%	\$	\$	\$	\$	\$				

I certify that the above contributions are due in respect of the employees listed, for the periods shown and I enclose Cheques/cash in payment.

Signature of Employer \_\_\_\_\_

Date \_\_\_\_\_

**TOTALS**

\$5,250.00    \$431.80

Surcharge (5% Total Contributions)    \$21.59

**GRAND TOTALS**

\$5,250.00    \$453.39

**OFFICIAL USE ONLY**

Cashier _____	Receipt No. _____	Date _____	Verified _____
Posted _____	Date _____	Checked _____	

**CHEQUE NUMBER**

First Caribbean 5892

EMPLOYER Barry's Express Service

## SOCIAL SECURITY BOARD MONTHLY REMITTANCE FORM

FOR THE MONTH OF

EMPLOYER'S  
REGISTRATION  
NUMBER 6802

February-10

Employee's Registration Number	NAMES OF EMPLOYEES	SEX	EARNINGS AND CONTRIBUTION					Total Earnings for Month	Total 8 1/2% Contribution	No. of Weeks Worked	COMMENTS	
				Week No. 1	Week No. 2	Week No. 3	Week No. 4					Week No. 5 or Monthly Salary
95803	Dwayne Mail	M	Earnings	\$	\$1,500.00	\$	\$1,210.00	\$	\$2,710.00	\$218.88	4	
			Employee 4%	\$	\$54.60	\$	\$48.40	\$				
			Employer 4 1/2%	\$	\$61.43	\$	\$54.45	\$				
80590	Nicole Priority	F	Earnings	\$	\$900.00	\$	\$1,000.00	\$	\$1,900.00	\$161.50	4	
			Employee 4%	\$	\$36.00	\$	\$40.00	\$				
			Employer 4 1/2%	\$	\$40.50	\$	\$45.00	\$				
80958	Sayretta Delivery	F	Earnings	\$	\$1,209.00	\$	\$1,100.00	\$	\$2,309.00	\$196.27	4	
			Employee 4%	\$	\$48.36	\$	\$44.00	\$				
			Employer 4 1/2%	\$	\$54.41	\$	\$49.50	\$				
80957	Lena Postal	F	Earnings	\$	\$2,000.00	\$	\$2,000.00	\$	\$4,000.00	\$232.05	4	
			Employee 4%	\$	\$54.60	\$	\$54.60	\$				
			Employer 4 1/2%	\$	\$61.43	\$	\$61.43	\$				
			Earnings	\$	\$	\$	\$	\$				
			Employee 4%	\$	\$	\$	\$	\$				
			Employer 4 1/2%	\$	\$	\$	\$	\$				

I certify that the above contributions are due in respect of the employees listed, for the periods shown and I enclose cheque/cash in payment.

**TOTALS**    \$10,919.00    \$808.69

Signature of Employer \_\_\_\_\_

Surcharge (5% Total Contributions)    \$40.43

Date \_\_\_\_\_

**GRAND TOTALS**    \$10,919.00    \$849.12

**OFFICIAL USE ONLY**

Cashier _____	Receipt No. _____	Date _____	Verified _____
Posted _____	Date _____	Checked _____	

**CHEQUE NUMBER**

First Bank 800

EMPLOYER Nibb's Trust Services

## SOCIAL SECURITY BOARD MONTHLY REMITTANCE FORM

FOR THE MONTH OF

EMPLOYER'S  
REGISTRATION  
NUMBER 6019

February-10

Employee's Registration Number	NAMES OF EMPLOYEES	SEX	EARNINGS AND CONTRIBUTION					Total Earnings for Month	Total 8 1/2% Contribution	No. of Weeks Worked	COMMENTS	
				Week No. 1	Week No. 2	Week No. 3	Week No. 4					Week No. 5 or Monthly Salary
80395	Dezerra Fudicary	F	Earnings	\$	\$2,000.00	\$	\$2,000.00	\$	\$4,000.00	\$251.39	4	
			Employee 4%	\$	\$59.15	\$	\$59.15	\$				
			Employer 4 1/2%	\$	\$66.54	\$	\$66.54	\$				
80592	Roy Investment	F	Earnings	\$	\$1,310.00	\$	\$1,310.00	\$	\$2,620.00	\$222.70	4	
			Employee 4%	\$	\$52.40	\$	\$52.40	\$				
			Employer 4 1/2%	\$	\$58.95	\$	\$58.95	\$				
80949	Lisa Stocks	F	Earnings	\$	\$1,300.00	\$	\$1,200.00	\$	\$2,500.00	\$212.50	4	
			Employee 4%	\$	\$52.00	\$	\$48.00	\$				
			Employer 4 1/2%	\$	\$58.50	\$	\$54.00	\$				
81234	Yvonne Bonds	F	Earnings	\$	\$3,200.00	\$	\$3,200.00	\$	\$6,400.00	\$251.39	4	
			Employee 4%	\$	\$59.15	\$	\$59.15	\$				
			Employer 4 1/2%	\$	\$66.54	\$	\$66.54	\$				
			Earnings	\$	\$	\$	\$	\$				
			Employee 4%	\$	\$	\$	\$	\$				
			Employer 4 1/2%	\$	\$	\$	\$	\$				

I certify that the above contributions are due in respect of the employees listed, for the periods shown and I enclose cheque/cash in payment.

**TOTALS**    \$15,520.00    \$937.98

Signature of Employer \_\_\_\_\_

Surcharge (5% Total Contributions)    \$46.90

Date \_\_\_\_\_

**GRAND TOTALS**    \$15,520.00    \$984.87

**OFFICIAL USE ONLY**

Cashier _____	Receipt No. _____	Date _____	Verified _____
Posted _____	Date _____	Checked _____	

**CHEQUE NUMBER**

First Bank 1071

EMPLOYER Frett's Banking Service

## SOCIAL SECURITY BOARD MONTHLY REMITTANCE FORM

FOR THE MONTH OF

EMPLOYER'S  
REGISTRATION  
NUMBER 6020

February-10

Employee's Registration Number	NAMES OF EMPLOYEES	SEX	EARNINGS AND CONTRIBUTION					Total Earnings for Month	Total 8 1/2% Contribution	No. of Weeks Worked	COMMENTS	
				Week No. 1	Week No. 2	Week No. 3	Week No. 4					Week No. 5 or Monthly Salary
67000	Lena Cheque	F	Earnings	\$	\$	\$	\$	\$10,500.00	\$10,500.00	\$251.39	4	
			Employee 4%	\$	\$	\$	\$	\$118.30				
			Employer 4 1/2%	\$	\$	\$	\$	\$133.09				
78959	Lisa Savings	F	Earnings	\$	\$	\$	\$	\$2,700.00	\$2,700.00	\$229.50	4	
			Employee 4%	\$	\$	\$	\$	\$108.00				
			Employer 4 1/2%	\$	\$	\$	\$	\$121.50				
75895	Dwayne Automated	M	Earnings	\$	\$	\$	\$	\$2,500.00	\$2,500.00	\$212.50	4	
			Employee 4%	\$	\$	\$	\$	\$100.00				
			Employer 4 1/2%	\$	\$	\$	\$	\$112.50				
68555	Barry Teller	M	Earnings	\$	\$	\$	\$	\$2,850.00	\$2,850.00	\$242.25	4	
			Employee 4%	\$	\$	\$	\$	\$114.00				
			Employer 4 1/2%	\$	\$	\$	\$	\$128.25				
			Earnings	\$	\$	\$	\$	\$				
			Employee 4%	\$	\$	\$	\$	\$				
			Employer 4 1/2%	\$	\$	\$	\$	\$				
<b>TOTALS</b>							<b>\$18,550.00</b>	<b>\$935.64</b>				

I certify that the above contributions are due in respect of the employees listed, for the periods shown and I enclose cheque/cash in payment.

Signature of Employer \_\_\_\_\_

Date \_\_\_\_\_

Surcharge (5% Total Contributions) \$46.78

**GRAND TOTALS**

<b>\$18,550.00</b>	<b>\$982.42</b>	
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**OFFICIAL USE ONLY**

Cashier _____	Receipt No. _____	Date _____	Verified _____
Posted _____	Date _____	Checked _____	

**CHEQUE NUMBER**

Scotia 536