



SOCIAL SECURITY AND NATIONAL INSURANCE TRUST
NATIONAL PENSIONS ACT, 2008 (ACT 766)

CLEARANCE CERTIFICATE N^o 0915839

ISSUING BRANCH OFFICE..... AIRPORT CITY BRANCH DATE OF ISSUE..... 14TH SEPTEMBER, 2016
NAME OF ESTABLISHMENT..... ADEKO MINDS LIMITED
ER. NO:..... 201500837 NATURE OF BUSINESS:..... ADVERTISING, MARKETING, EVENT MANAGEMENT.
BUSINESS REG. NO:..... CS307892014 IRS TIN
ADDRESS:..... POST OFFICE BOX CT 847, CANTONMENTS - ACCRA
LOCATION OF ESTABLISHMENT:..... DZORWULU NEAR PARISH CHAPEL- ACCRA
TEL NO:..... 0302-783812 MOBILE PHONE NO:.....
(Establishment) (Contact Person)
COVERABLE DATE:..... FEBRUARY, 2015

The above-named Establishment in compliance with the provisions under the **NATIONAL PENSIONS ACT, 2008 (Act 766)** has applied for a **Clearance Certificate** for the following purpose(s):

REGISTER AND DO BUSINESS WITH GHANA TOURISM AUTHORITY

I Certify that as at SEPTEMBER, 2016 This Establishment
FOURTEEN (14) WORKERS (Date of Issue)

Employing
has: (Number of Workers)

- a. paid all Social Security Contributions (including penalties) up to:..... AUGUST, 2016
b. submitted all Contribution Reports and fulfilled all other obligations under Act 766
c. made satisfactory arrangements to fulfill its obligations under Act 766
13TH OCTOBER, 2016

I therefore issue this certificate which expires on:.....
THIRTEENTH OCTOBER, YEAR TWO THOUSAND AND SIXTEEN

BEATRICE E. KUFFOUR-DUAH (MRS.)
BRANCH MANAGER
for: DIRECTOR GENERAL

N.B: Any alteration or falsification of this document is a crime and offender(s) **SHALL** be prosecuted