ZIMBABWE REVENUE AUTHORITY



Return For The Remittance Of P.A.Y.E Form P2

*Attachments*

Region: Hatfield Station: Harare

PART A

|  |  |
| --- | --- |
| 1. Employer's Name | National Aids Council |
| 2.Trade Name | NATIONAL AIDS COUNCIL |
| 3. Business Partner Number | 200011098 |
| 4. PAYE Number | 200011098 |
| 5. TIN | 200011098 |
| 6. Physical Address | 100 CENTRAL AVENUE HARARE |
| 7. Postal Address | 7. Postal Address BOX MP11311, MOUNT PLEASANT, HARARE |
| 8. Tax Period | 2022-01-17 |
| 9. Due Date | 2022-01-05 |
| 10. E-mail address | schinhema@nac.org.zw |
| 11. Cell number | 0242791171 |

PART B

Total in ZWL ZWL Paid USD in ZWL USD Paid

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. Total Remuneration | 75976336.48 | 39476348.48 | 36499988.00 | 364999.88 |
| 2. Number of Employees (Inc contract employees) | 329 | | | |
| 3. Gross PAYE Exchange Rate @ 234 | 13151107.90 | 8758967.90 | 4392140.00 | 43921.40 |
| 4. AIDS Levy @3% | 394533.28 | 262769.08 | 131764.20 | 1317.67 |
| 5. Total Tax Paid | 13545641.18 | 9021736.98 | 4523904.20 | 45239.07 |

I declare that the information I have given on this form is correct and complete.

Date stamp

|  |  |  |
| --- | --- | --- |
| ................................................................... | ................................................................... | ................................................................... |
| Name | Designation | Signature |

Date of Submission

Please note that:

1. Interest is charged at 10% per annum for late remittance of PAYE.
2. Late payments may attract penalties.