**COMPANY NAME:**

**KRIN:**

**TIN:**

**OFFICE ADDRESS:**

**EMAIL ADDRESS:**

**PHONE NUMBER:**

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| **S/N** | **TITLE** | **SURNAME** | **OTHER NAMES** | **KRIN** | **PHONE NO** | **BASIC + ALL ALLOWANCES** | **PROVIDENCE FUNDS** | | | |
| **PENSION** | **NHF** | **NHIS** | **LIFE ASSURANCE** |
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