



Transaction Year (CCYY)

2 0 2 2

Year of Assessment (CCYY)

2 0 2 2

Period of Reconciliation (CCYMM)

2 0 2 2 0 2

# Employee Income Tax Certificate

IRP5/IT3(a)

Certificate No.

7 2 7 0 7 6 1 8 2 0 2 0 1 5 0 2 A B C T R A D I N G P T Y 9

Type of Certificate

I R P 5

Certificate has ETI (Employment Tax Incentive)

Y  N

## Employee Information

IRPINF1

Employee Number

E M P L O Y 0 1 9

Surname / Trading Name

J O H A N N E S

First Two Names

S M I T H

Initials

J

Nature of Person

A

Date of Birth (CCYYMMDD)

1 9 8 8 1 1 2 2

ID No.

8 0 1 1 2 2 0 8 7 1 1 8 7

Income Tax Ref No.

Passport/Permit No.

Passport Country / Country of Origin (e.g. South Africa = ZAF)

Home Tel No.

Bus Tel No.

0 1 0 4 4 3 5 9 1 9

Fax No.

Cell No.

0 7 2 1 5 2 4 3 6 1

Contact Email

## Employee Address Details - Residential

Unit No.

1 2

Complex (if applicable)

Street No.

4 1

Street / Name of Farm

B R A N D R O A D

Suburb / District

M I D R A N D

City / Town

J O H H A N N E S B U R G

Postal Code

1 6 8 2

Country Code

## Employee Address Details - Postal

Mark here with an "X" if same as above or complete your Postal Address

Is your Postal Address a Street Address?

Y

N

Mark here with an "X" if address is Care Of

Postal Agency or Other Sub-unit (if applicable) (e.g. Postnet Suite ID)

PO Box

Private Bag

Other PO Special Service (specify)

Number

Post Office

Country Code

Postal Code

IRP5IT3a

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FV 2014.01.05 SV 1401

CT 03

NO 7270761820

P

Y 2022

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**Employee Remuneration Bank Account Details**

Certificate Number: 7270761820201502DENVEREMPLOY ITRQWA01

Mark here with an "X" if not paid electronically or if foreign bank account

Account No. 9 1 7 4 X 1 X 8 6 X

Branch No. 6 3 2 0 0 5

Bank Name A B S A

Branch Name S I L V E R T O N

Account Holder Name J O H A N N E S

**Bank Account Type**

**Employer Reference Numbers**

Account Holder Relationship: Own  Joint  3rd Party

PAYE Ref No. 7 2 7 0 X 6 1 X 2 0

Account Type: Cheque / Current Acc.  Bond Acc.

SDL Ref No.

Savings Acc.  Credit Card Acc.

UIF Ref No. U 2 7 0 X 6 1 X 2 0

Transmission Acc.  Subscription Share Acc.

**Tax Certificate Information**

Trading or Other Name F I X O N A T E T R A D I N G E N T E R P R I S E S ( P T Y ) L T D

**Employee Address Details - Business**

Unit No. 1 Complex (if applicable) M A P O N Y A T O W E R S

Street No. 2 1 3 Street / Name of Farm D U T O I T S T R E E T

Suburb / District A R C A D I A

City / Town P R E T O R I A Postal Code 0 0 0 1 Country Code

**Pay Periods**

**Directive Numbers**

Periods in Year of Assessment 1 2 , 0 0 0 0

Directive No. 3 6 0 1

No. of Periods Worked 1 2 , 0 0 0 0

Directive No. 3 6 9 7

Period Employed From (CCYYMMDD) 2 0 0 9 0 8 0 3

Directive No. 3 6 9 8

Period Employed To (CCYYMMDD) 2 0 2 2 0 2 0 2

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Income Received

Table with 2 columns: Amount, Source Code. Row 1: Amount 95479, Source Code 3601. Other rows are empty.

Income Received (continued)

Table with 2 columns: Amount, Source Code. Rows include Non-Taxable Income, Gross Retirement Funding Income, Gross Non-Retirement Funding Income, and Total Deductions / Contributions (4497).

Tax Credits and/or Employer's/Employee Contributions

Table with 2 columns: Description, Amount. Rows include SITE (4101), PAYE (4102), PAYE on Lump Sum Benefit (4115), Employee and Employer UIF Contribution (4141), Employer SDL Contribution (4142), Total Tax, SDL and UIF (4149), Medical Scheme Fees Tax Credit (4116), and Reason for Non-Deduction of Employees' Tax (4150).

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