## FORM A (EST)



## MONTHLY WITHHOLDING TAX RETURN

## 1 JULY 2024 - 30 JUNE 2025

Nauru Revenue Office Ministry of Finance

Willisti y of Finance	_							
Return for t		/ 20	24-2025					
Taxpayer Identificatio	n Number (TIN)							
SECTION A: NAME AND ADDRESS OF EMPLOYER/PAYER								
Name of Employer/Paye	er:							
Contact Person or Repre	esentative							
Postal Address								
Email.								
Email: Phone No.:								
Phone No.:								
SECTION B: MONT	HLY TAX DEDI	UCTIONS						
Number of Employees Subjected to Tax Deductions								
- ·	•							
Number of Sub-contractors Subjected to Tax Deductions  Total Salary, Wages and/or Taxable Allowances Paid								
Total Service Fees Paid								
Total Payments								
-	Day This Amount	`						
Tax Deducted @ 20% (Pay This Amount)  (Transfer totals (i), (ii), (iii) & (iv) from SECTION C)								
(Transfer totals (1), (11), (111) & (1	1v) from SECTION C)							
DECLADATION 1.1	1 4 4 4	1 1 1 6		, 1				
<b>DECLARATION:</b> I declare that the particulars on this form are true and correct.								
Full Name		Title / Po	osition					
Signature of Applicant:			Date:					
IT IS A SERIOUS OFFENCE TO GIVE FALSE INFORMATION TO THE								
SECRETARY FOR FINANCE								
Please deliver completed for nauru.tax@gmail.com Cash payments can be made			AIWO dis	trict, or by email to				
Account Name: T	REASURY OPERAT	ING ACCOUNT						
	33-000							
	5 <b>47-63767</b> endigo & Adelaide Ba	ank Limited						
	Bendigo & Adelaide Bank Limited The Bendigo Centre, Bendigo, Victoria – 3559, Australia.							
Swift Code: B	ENDAU3BXXX							
Reference description: $\underline{\mathbf{E}}$	mployer TIN/ESTA/(	month/year)						
Verified and Entered:			Date:					

SECTION C: EMPLOYMENT AND SERVICES TAX DEDUCTIONS (includes all payments made in respect of work performed in Nauru or elsewhere)

Name of Payee	TIN#	Salary/Wages/Taxable Allowances Paid	Service Fees Paid	Total Payments	Tax Deducted 20%
Total (Transfer totals to Section B)		(i)	(ii)\$	(iii)\$	(iv) \$