

**MINISTRY OF FINANCE, TRADE, INVESTMENT AND ECONOMIC PLANNING**  
**FINANCIAL ASSISTANCE FOR JOB RETENTION/FINANCIAL ASSISTANCE FOR THE SELF-EMPLOYED**



**Annex B : List of contracts**

| A Business Information                        |  |  |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|--|--|
| TAXPAYER IDENTIFICATION NUMBER (TIN)          |  |  |  |  |  |  |  |  |  |  |  |
| BUSINESS REGISTRATION NUMBER (BRN)            |  |  |  |  |  |  |  |  |  |  |  |
| EMPLOYER ID NUMBER (SPF)                      |  |  |  |  |  |  |  |  |  |  |  |
| OTHER REGISTRATION NUMBER (Specify)           |  |  |  |  |  |  |  |  |  |  |  |
| LICENSE NUMBER                                |  |  |  |  |  |  |  |  |  |  |  |
| NAME OF BUSINESS                              |  |  |  |  |  |  |  |  |  |  |  |
| FULL NAME OF AUTHORIZED PERSON                |  |  |  |  |  |  |  |  |  |  |  |
| National Identity Number of Authorized Person |  |  |  |  |  |  |  |  |  |  |  |

| B Contract details   |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|
| To ensure that the assistance is received by entities (including individuals) that merit it, please fill out the form below to identify the entities (including individuals) that rely on your firm for income. The table below outlines the details being requested. Should you have further queries regarding the information being sought, kindly write to fa4jr@finance.gov.sc |  |  |  |  |  |  |  |  |  |  |  |

| Area of contracting for Services | Name of Company | TIN | Date that contract came into force (DD/MM/YYYY) | Date that contract expires (DD/MM/YYYY) | Monthly Value (SCR) | Payment to Contractor in March 2019 (SCR) | Payment to Contractor in April 2019 (SCR) | Payment to Contractor in May 2019 (SCR) | Payment to Contractor in June 2019 (SCR) | Number of Staff | Method of Payment |
|----------------------------------|-----------------|-----|---|---|---------------------|---|---|---|--|-----------------|-------------------|
|                                  |                 |     |   |   |                     |   |   |   |  |                 |                   |
|                                  |                 |     |   |   |                     |   |   |   |  |                 |                   |
|                                  |                 |     |   |   |                     |   |   |   |  |                 |                   |
|                                  |                 |     |   |   |                     |   |   |   |  |                 |                   |
|                                  |                 |     |   |   |                     |   |   |   |  |                 |                   |
|                                  |                 |     |   |   |                     |   |   |   |  |                 |                   |
|                                  |                 |     |   |   |                     |   |   |   |  |                 |                   |
|                                  |                 |     |   |   |                     |   |   |   |  |                 |                   |
|                                  |                 |     |   |   |                     |   |   |   |  |                 |                   |
|                                  |                 |     |   |   |                     |   |   |   |  |                 |                   |
|                                  |                 |     |   |   |                     |   |   |   |  |                 |                   |

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For any assistance, kindly contact: tel 282 82 62 or email: fa4jr@finance.gov.sc

**Guidance to filling Annex B List of Contracts**

**Area of Contracting for Services** This is the general area in which the said contractor is operating. The contractor can be an individual or a firm. Categories can be one of the following: Landscaping, Transportation Staff, Transportation Tourists, Food, Entertainment, Telecommunications, Other (please specify)

**Name of Company** This is the formal name of the company

**TIN** Tax Identification Number of the contractor, in the event that an individual is contracted, then provide their NIN

**Date that contract came into force** This is the date stipulated on the contract document. If there is no formal document, just put in Jan 1 of year that arrangement started. E.g. if it started sometime in 2017, but no contract was signed, just put in 01/01/2017

**Date that contract expires** This is the date that the existing contract expires. If there is no contract, insert the date 31/12/2020

**Monthly Value** This is the average amount of money given to the contractor since the contract started

**Payment to Contractor in March 2019** This was the payout to the contractor in March 2019. If contractor was not providing a service then, put 0

**Payment to Contractor in April 2019** This was the payout to the contractor in April 2019. If contractor was not providing a service then, put 0

**Payment to Contractor in May 2019** This was the payout to the contractor in May 2019. If contractor was not providing a service then, put 0

**Payment to Contractor in June 2019** This was the payout to the contractor in June 2019. If contractor was not providing a service then, put 0

**Number of Staff** Maximum number of workers that the contractor has on your site at any point in time

**Method of Payment** This is either cash, cheque, bank transfer (online or card)

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