NB PAYE B.

Republic of South Africa ◆ Republiek van Suid-Afrika

Government Gazette Extraordinary

Buitengewone Staatskoerant

(Registered at the Post Office as a Newspaper) (As 'n Nuusblad by die Poskantoor Geregistreer)

VOL. VI.] PRICE 5c. PRETORIA, 26 OCTOBER / 26 OKTOBER 1962. PRYS 5c. [No. 362.

GOVERNMENT NOTICE.

DEPARTMENT OF INLAND REVENUE.

No. 1751.] [26 October 1962.

The forms and the extracts from the employees' tax deduction tables which are published herewith relate to forms and tables which it is proposed to use in conjunction with the proposed Pay-as-you-earn system of tax collection, the proposals in regard to which were published in *Government Gazette Extraordinary* No. 324 of the 31st August, 1962.

The purpose of the present publication is to familiarise the public with the forms which are mentioned in the proposals and to give employers, employees and provisional taxpayers the opportunity to study the requirements of the various forms and tables.

The forms are not yet available and supplies thereof will be sent to registered employers and to provisional taxpayers in due course.

GOEWERMENTSKENNISGEWING.

DEPARTEMENT VAN BINNELANDSE INKOMSTE.

No. 1751.] [26 Oktober 1962.

Die vorms en die uittreksels uit die werknemersbelastingaftrekkingstabelle wat hierby gepubliseer word, het betrekking op vorms en tabelle wat, na die voorneme is, in verband met die voorgestelde Lopende Betaalstelsel van belastinginvordering gebruik sal word. Die voorstelle met betrekking tot die Lopende Betaalstelsel is in *Buitengewone Staatskoerant* No. 324 van 31 Augustus 1962 gepubliseer.

Die doel van die huidige publikasie is om die publiek met die vorms wat in die voorstelle genoem word, vertroud te maak en om aan werkgewers, werknemers en voorlopige belastingpligtiges die geleentheid te bied om die vereistes van die verskillende vorms en tabelle te bestudeer.

Die vorms is nog nie beskikbaar nie en voorrade daarvan sal mettertyd aan geregistreerde werkgewers en aan voorlopige belastingpligtiges gestuur word.

I.R.P. 1.

REPUBLIC OF SOUTH AFRICA.

DEPARTMENT OF INLAND REVENUE.

REGISTRATION OF EMPLOYER.

(Income Tax Amendment Act, 1962.)

PLEASE READ NOTES ON OPPOSITE PAGE.

For Official Use.
● Ref. No. ____________
Noted on register.
1 ____________
2 ____________

1. DETAILS OF EMPLOYER OR BRANCH EMPLOYER (see Notes 1, 3, 5, 6 and 9).
   ●(*a*) Trade Name ____________
   (*b*) Name(s) of Employer (in full) ____________
   (*c*) Business Address ____________
   ●(*d*) Postal Address ____________
   (*e*) Business Telephone Number ____________
2. REPRESENTATIVE EMPLOYER (see Notes 2, 3, 5, 7 and 9).
   (*a*) Name (in full) ____________
   (*b*) Business or Postal Address ____________
3. BRANCHES OR DIVISIONS OF EMPLOYER'S ACTIVITIES (see Notes 3, 8 and 9).
   Trade names and addresses of branches or divisions (if space is insufficient, please attach list).

	Will each branch or division be registered as a Branch Employer? "Yes" or "No".
(*a*) ____________	____________
(*b*) ____________	____________
(*c*) ____________	If "Yes", please complete a separate form I.R.P. 1. in respect of each branch or division and submit with main form.

If you have no branches or divisions, please write "NIL" in above space.

4. REGISTRATION OF BRANCH (see Note 9).
   State trade name and address of head office ____________
5. EMPLOYEES (see Note 10).—State approximate number of employees from whose remuneration Employees Tax will be deducted by the employer or branch employer, as the case may be ____________

____
Employer or Representative Employer.

(For Official Use.)

ACKNOWLEDGMENT.

OFFICE DATE STAMP.

SIR/GENTLEMEN/MADAM,

INCOME TAX: REGISTRATION OF EMPLOYER.

1. The following details in respect of your registration as employer in terms of section *thirty-six* of the Income Tax Amendment Act, 1962, have been recorded:—
   (*a*) Trade Name
   (*b*) Name of Employer or Representative Employer
   (*c*) Business Address
   (*d*) Postal Address
2. Your reference number, to be used in all matters relating to your registration, is:—

3. If any of the particulars registered as above, should change or if you cease to be an employer, please advise me of such change or cessation within fourteen days of date of change or cessation. For this purpose a supply of forms I.R.P. 1 (*a*) is enclosed.

Yours faithfully,

Receiver of Revenue.

I.R.P. 1.

REPUBLIEK VAN SUID-AFRIKA.

DEPARTEMENT VAN BINNELANDSE INKOMSTE.

REGISTRASIE VAN WERKGEWER.

(Inkomstebelastingwysigingswet, 1962.)

LEES ASSEBLIEF OPMERKINGS OP TEENOORGESTELDE BLADSY.

Vir amptelike gebruik.
Verw. No.
In register aangeteken.
1
2

1. BESONDERHEDE VAN WERKGEWER OF TAK-WERKGEWER (kyk Opmerkings 1, 3, 5, 6 en 9).
   (*a*) Handelsnaam
   (*b*) Naam/Name van werkgewer (voluit)
   (*c*) Besigheidsadres
   (*d*) Posadres
   (*e*) Besigheidstelefoonnommer
2. VERTEENWOORDIGENDE WERKGEWER (kyk Opmerkings 2, 3, 5, 7 en 9).
   (*a*) Naam (voluit)
   (*b*) Besigheids- of Posadres
3. TAKKE OF AFDELINGS VAN WERKGEWER SE BEDRYWIGHEDE (kyk Opmerkings 3, 8 en 9).
   Handelsname en adresse van takke of afdelings. (Indien ruimte onvoldoende is, heg. asb. 'n lys aan).

	Sal elke tak of afdeling as 'n Takwerkgewer geregistreer word? „Ja" of „Nee".
(*a*)	
(*b*)	
(*c*)	
As u geen takke of afdelings het nie, skryf asseblief „GEEN" in bostaande spasie.	Indien „Ja", vul asb. 'n afsonderlike vorm I.R.P. 1 in, ten opsigte van elke tak of afdeling en stuur saam met hoofvorm.

4. REGISTRASIE VAN TAK (kyk Opmerking 9).
   Meld handelsnaam en adres van hoofkantoor
5. WERKNEMERS (kyk Opmerking 10).—Meld by benadering, getal werknemers van wie se besoldiging werknemersbelasting deur die werkgewer of tak-werkgewer, na gelang van die geval, afgetrek sal word

Werkgewer of Verteenwoordigende Werkgewer.

(Vir amptelike gebruik.)

ONTVANGSBEWYS.

KANTOORDATUMSTEMPEL.

MENEER/MENERE/MEVROU/MEJUFFROU,

INKOMSTEBELASTING: REGISTRASIE VAN WERKGEWER.

1. Die volgende besonderhede ten opsigte van u registrasie as werkgewer ingevolge artikel *ses-en-dertig* van die Inkomstebelastingwysigingswet, 1962, is aangeteken:—
   (*a*) Handelsnaam
   (*b*) Naam van werkgewer of Verteenwoordigende Werkgewer
   (*c*) Besigheidsadres
   (*d*) Posadres
2. U verwysingsnommer, wat by alle geleenthede in verband met u registrasie gebruik moet word, is:—

3. Indien enige van bostaande geregistreerde besonderhede sou verander of indien u ophou om 'n werkgewer te wees, geliewe my binne veertien dae vanaf die datum waarop die verandering ingetree het of waarop u opgehou het om 'n werkgewer te wees, daarvan te verwittig. Vir hierdie doel word 'n voorraad vorms, I.R.P. 1 (*a*) ingesluit.

Die uwe,

Ontvanger van Inkomste.

REPUBLIC OF SOUTH AFRICA.

I.R.P. 1 (*a*).

OFFICIAL.
Reference Number.

DEPARTMENT OF INLAND REVENUE.

INCOME TAX: REGISTRATION OF EMPLOYER.

CHANGE OF REGISTERED PARTICULARS.
(Income Tax Amendment Act, 1962.)

Completed Form must be lodged with the Assessing Officer where you are registered.

EXISTING REFERENCE NUMBER OF EMPLOYER OR BRANCH.

1. EXISTING PARTICULARS.

The following particulars are on record at your office:

(*a*) Trade Name___

(*b*) Name of Employer or Representative Employer (in full)___

(*c*) Business Address___

(*d*) Postal Address___ (*e*) Business Telephone No.___

*Please change these particulars as indicated in paragraph 2, below,
or
*Delete these particulars from your records as I have ceased to be an Employer on___ (date)

and I return the following documents herewith: (i) Tax Tables and, (ii) I.R.P. 5 and 5 (*a*) forms___ (insert number)

* Delete which is not applicable.

2. NEW PARTICULARS.

●(*a*) New Trade Name___

(*b*) Name of Employer or Representative Employer (in full)___

(*c*) New Business Address___

●(*d*) New Postal Addres___ (*e*) New Business Telephone No.___

(*f*) Remarks___

3. DISCONTINUANCE OF BRANCH OR DIVISION.

(*a*) Trade Name of Branch or Division___

(*b*) Address of Branch or Division___

(*c*) Date of Discontinuance___

___
Employer or Representative Employer.

(For Official Use.)

ACKNOWLEDGMENT.

NEW REFERENCE NUMBER OF EMPLOYER OR BRANCH.

OFFICE DATE STAMP.

SIR/GENTLEMEN/MADAM,

REGISTRATION OF EMPLOYER: CHANGE OF REGISTERED PARTICULARS.

*1. The following new particulars have been recorded in my register of employers:—

Trade Name___

Name of Employer or Representative Employer___

Business Address___

Postal Address___ Business Telephone No.___

*2. (*a*) The date you have ceased to be an employer or discontinued branch or division activities at___ has been noted in my register.

(*b*) Receipt of the documents forwarded by you, is hereby acknowledged.

Yours faithfully,

___
Receiver of Revenue.

* Delete which is not applicable.

REPUBLIEK VAN SUID-AFRIKA.

I.R.P. 1 (*a*).

DEPARTEMENT VAN BINNELANDSE INKOMSTE.

INKOMSTEBELASTING: REGISTRASIE VAN WERKGEWER.

VERANDERING VAN GEREGISTREERDE BESONDERHEDE.

(Inkomstebelastingwysigingswet, 1962.)

Ingevulde vorm moet by die aanslagbeampte waar u geregistreer is, ingedien word.

AMPTELIK.
Nuwe Verwysingsnommer.
....

BESTAANDE VERWYSINGSNOMMER VAN WERKGEWER OF TAK.

1. BESTAANDE BESONDERHEDE.
Die volgende besonderhede is in u kantoor opgeteken:—

(*a*) Handelsnaam............

(*b*) Naam van werkgewer of verteenwoordigende werkgewer (voluit)............

....

(*c*) Besigheidsadres............

(*d*) Posadres............ (*e*) Besigheidstelefoonnommer............

*Verander asseblief die besonderhede soos in paragraaf 2, hieronder, aangedui,

of

*Skrap hierdie besonderhede van u rekords aangesien ek op............ opgehou het om 'n werkgewer te wees
(datum)
en ek stuur die volgende dokumente hierby terug: (i) Belastingtabelle en, (ii) (I.R.P. 5 en 5 (*a*) vorms............
(meld getal)

* Skrap wat nie van toepassing is nie.

2. NUWE BESONDERHEDE.

●(*a*) Nuwe handelsnaam............

(*b*) Naam van werkgewer of verteenwoordigende werkgewer (voluit)............

....

(*c*) Nuwe besigheidsadres............

●(*d*) Nuwe posadres............ (*e*) Nuwe besigheidstelefoonnommer............

(*f*) Opmerkings............

3. STAKING VAN TAK OF AFDELING.

(*a*) Handelsnaam van tak of afdeling............

(*b*) Adres van tak of afdeling............

(*c*) Datum waarop gestaak............

....
Werkgewer of Verteenwoordigende Werkgewer.

(Vir amptelike gebruik.)

ONTVANGSBEWYS.

NUWE VERWYSINGSNOMMER VAN WERKGEWER OF TAK.

KANTOORDATUMSTEMPEL.

MENEER/MENERE/MEVROU/MEJUFFROU,

REGISTRASIE VAN WERKGEWER: VERANDERING VAN GEREGISTREERDE BESONDERHEDE.

*1. Die volgende nuwe besonderhede is in my register van werkgewers aangeteken:—

Handelsnaam............

Naam van werkgewer of verteenwoordigende werkgewer............

Besigheidsadres............

Posadres............ Besigheidstelefoonnommer............

*2. (*a*) Die datum waarop u opgehou het om 'n werkgewer te wees of tak- of afdelingsbedrywighede te............ gestaak het, is in my register aangeteken.

(*b*) Ontvangs van die dokumente deur u aangestuur, word hierby erken.

Die uwe,

....
Ontvanger van Inkomste.

*** Haal deur wat nie van toepassing is nie.**

I.R.P. 2.

REPUBLIC OF SOUTH AFRICA—*REPUBLIEK VAN SUID-AFRIKA.*

DEPARTMENT OF INLAND REVENUE—*DEPARTEMENT VAN BINNELANDSE INKOMSTE.*

For use by Employee. *Vir gebruik deur werknemer.* Pension/Provident Fund Number. *Pensioen/Voorsorgsfondsnommer.*	PERSONAL PARTICULARS OF EMPLOYEE. *PERSOONLIKE BESONDERHEDE VAN WERKNEMER*	For use by Employer. *Vir gebruik deur werkgewer.* Tax Deduction Code. *Belastingaftrekking-kode*

(Employer must retain this form for examination by officers of the Department of Inland Revenue.)
(*Werkgewer moet hierdie vorm hou vir ondersoek deur amptenare van die Departement van Binnelandse Inkomste.*)

A. (1) Surname (capital letters)/*Familienaam (hoofletters)*..........
(2) First names (in full)/*Voorname (voluit)*..........
(3) Date of birth/*Datum van geboorte*..........
(4) Residential address/*Woonadres*..........
(5) Postal address/*Posadres*..........
(6) Province in which resident/*Provinsie waarin woonagtig*..........
†(7) Previous Income Tax Returns rendered to/*Vorige Inkomstebelasting-opgawes ingedien by:*
(i) Receiver of Revenue at/*Ontvanger van Inkomste te*..........
(ii) Under reference number/*Onder verwysingsnommer*..........
†Need not be filled in by married women/*Hoef nie deur getroude vroue ingevul te word nie.*
(8) State whether married/unmarried/divorced*/widowed/*Meld of getroud/ongetroud/geskei*/wewenaar/weduwee*..........

B. Names and dates of birth of children under 18 years*/*Name en geboortedatums van Kinders onder 18 jaar**:—
(Not to be completed by married women or part-time employees/*Moet nie deur getroude vroue of deeltydse werknemers ingevul word nie.*)

	Name/*Naam.*	Date of Birth/*Datum van geboorte.*
1.	....	....
2.	....	....
3.	....	....
4.	....	....
5.	....	....

C. Married women must furnish the following additional information/*Getroude vroue moet die volgende bykomende inligting verstrek:*
(1) Husband's full name/*Eggenoot se volle naam*..........
(2) Office to which he renders his Income Tax Return/*Kantoor waar hy sy Inkomstebelasting-opgawe indien*..........
(3) His Income Tax Reference Number/*Sy Inkomstebelastingverwysingsnommer*..........

D. I hereby certify that the information given in this return is true, correct and complete in every respect/*Ek sertifiseer hierby dat die inligting in hierdie opgawe verstrek in alle opsigte waar, juis en volledig is.*

.... Date/*Datum.* .... Signature of Employee/*Handtekening van werknemer.*

Remarks by employer/*Opmerkings deur werkgewer*..........

NOTES—*OPMERKINGS.*

I.R.P. 3.

REPUBLIC OF SOUTH AFRICA—*REPUBLIEK VAN SUID-AFRIKA.*

DEPARTMENT OF INLAND REVENUE—*DEPARTEMENT VAN BINNELANDSE INKOMSTE.*

EMPLOYEES' TAX DEDUCTION DIRECTIVE—*AANWYSING VAN WERKNEMERSBELASTINGAFTREKKING.*

No. B. 00001

To/*Aan*..........

Office Date Stamp.
Kantoordatumstempel.

PARTICULARS OF EMPLOYEE FOR WHOM DIRECTIVE IS MADE.
BESONDERHEDE VAN WERKNEMER VIR WIE AANWYSING GEMAAK IS.

Full name
Volle naam..........
Address
Adres..........
Province
Provinsie..........
Income Tax Reference Number
Inkomstebelastingverwysingsnommer..........
Office where on Income Tax Register
Kantoor waar op Inkomstebelastingregister..........
Pension/Provident Fund Number
Pensioen-/Voorsorgsfondsnommer..........

Sir/Gentlemen/Madam,
Meneer/Menere/Mevrou/Mejuffrou,

Under the provisions of paragraph II of the Fourth Schedule of the Income Tax Act, you are hereby required to comply with the
Ingevolge die bepalings van paragraaf II van die Vierde Bylae by die Inkomstebelastingwet, word hierby van u vereis om aan die aanwysing

directive marked ■ below, regarding the remuneration of the above-named employee.
hieronder, gemerk ■, met betrekking tot die besoldiging van die bogenoemde werknemer, te voldoen.

■ No tax to be deducted.
Geen belasting moet afgetrek word nie.
■ Tax at the rate of per *week/month to be deducted.
*Belasting teen die koers van R............per *week/maand moet afgetrek word.*
■ Tax under the Tax Code to be deducted in future.
Belasting onder die Belastingkode............moet in die vervolg afgetrek word.
*Delete inapplicable word/*Skrap die woord wat nie van toepassing is nie.*

This DIRECTIVE is valid for the period to
Hierdie AANWYSING is geldig vir die tydperk............tot............

Please file this form with the employee's return of personal particulars (I.R.P. 2) or in lieu thereof if no return has been submitted
Geliewe hierdie vorm saam met die werknemer se opgawe van persoonlike besonderhede (I.R. 2) te liasseer of in die plek daarvan indien
to you.
geen opgawe aan u verstrek is nie.

Yours faithfully/*Die uwe,*

....
Receiver of Revenue/*Ontvanger van Inkomste.*

I.R.P. 3 (*a*).

REPUBLIC OF SOUTH AFRICA.

DEPARTMENT OF INLAND REVENUE.

REQUEST FOR A TAX DEDUCTION DIRECTIVE.

THE RECEIVER OF REVENUE,

....

1. DETAILS OF PERSON IN RESPECT OF WHOM A DIRECTIVE IS REQUIRED.
   (*a*) Full Name (block letters)............
   (*b*) Address............
   ....
   (*c*) Income Tax Reference Number............
   (*d*) Office to which last Tax Return was rendered............
   *(*e*) State whether paid | MONTHLY. | WEEKLY. | DAILY. |
   (*f*) Average monthly/weekly/daily remuneration for current Tax Year............R............
   * Make an X in the block which is applicable.
2. REASON FOR REQUESTING DIRECTIVE.
   (*a*) Claim for rebate for Child/Children over 18 years of age:—
   (i) Name(s) of Child(ren)............
   ....
   (ii) Reasons why wholly dependent upon you............
   ....
   N.B.—Please furnish birth certificates for ALL your children for whom rebates are claimed.
   (*b*) Divorced Persons:—
   (i) Date of commencement of divorce proceedings............19......
   (ii) Have you submitted a copy of your Order of Divorce with previous Income Tax Returns? (Yes or No)............
   (If not, please submit a copy with this form.)
   (*c*) Request for Reduced Deduction:—
   (i) State reasons, in full, why tax at statutory rates should not be deducted............
   ....
   (ii) Amount of deduction required (state monthly; weekly or daily),............R............
3. TO BE COMPLETED BY PENSION, PROVIDENT OR RETIREMENT ANNUITY FUNDS.
   Determination of deduction from lump sum benefits payable by Pension/Provident/Retirement Annuity Fund on withdrawal by or on retirement or death of a member.
   The prescribed form "A" or "B", required to be furnished by the Fund must be completed in duplicate and submitted with this request.
4. DETERMINATION OF DEDUCTION FROM OTHER LUMP SUM BENEFITS PAYABLE.
   (i) Nature of benefit............
   (ii) Amount of benefit payable............
5. DETAILS OF EMPLOYER TO WHOM DIRECTIVE MUST BE ISSUED.
   (*a*) Trade Name (block letters)............
   (*b*) Business Address............
   (*c*) In the case of Government Departments, Railway or Provincial Administration, state name of Branch, Division or Section to which directive must be sent............

....
Date............ Signature.

I.R.P. 3 (*a*)

REPUBLIEK VAN SUID-AFRIKA.

DEPARTEMENT VAN BINNELANDSE INKOMSTE.

VERSOEK OM 'N AANWYSING VIR BELASTINGAFTREKKING.

DIE ONTVANGER VAN INKOMSTE,

....

1. BESONDERHEDE VAN PERSOON TEN OPSIGTE VAN WIE 'N AANWYSING VERLANG WORD.
   (*a*) Volle naam (blokletters)............
   (*b*) Adres............
   (*c*) Inkomstebelastingverwysingnommer............
   (*d*) Kantoor waar laaste Belastingopgawe ingedien is............
   *(*e*) Meld of | MAANDELIKS | WEEKLIKS | DAAGLIKS | betaal.
   (*f*) Gemiddelde maandelikse/weeklikse/daaglikse besoldiging vir lopende belastingjaar..................R............
   *Maak 'n X in die blok wat van toepassing is.

2. REDES VIR VERSOEK OM 'N AANWYSING.

(a) Eis vir korting vir 'n kind/kinders oor die ouderdom van 18 jaar:—

(i) Naam/Name van kind/kinders

(ii) Redes waarom geheel-en-al van u afhanklik

L.W.—Geliewe geboortesertifikate van AL u kinders ten opsigte van wie u kortings eis, in te dien.

(b) Geskeie persone:—

(i) Datum waarop geregtelike stappe om egskeiding ingestel is 19

(ii) Het u 'n afskrif van u Egskeidingsbevel saam met vorige Inkomstebelastingopgawes ingedien? (Ja of Nee)
(Indien nie, stuur asseblief 'n afskrif saam met hierdie vorm.)

(c) Versoek om Verminderde Aftrekking:—

(i) Gee volledige redes waarom belasting nie teen statutêre tariewe afgetrek moet word nie

(ii) Bedrag van aftrekking wat verlang word (meld maandeliks of weekliks of daagliks) R

3. MOET DEUR PENSIOEN-, VOORSORGS- OF UITTREDINGANNUÏTEITSFONDS INGEVUL WORD.

Bepaling van aftrekking van enkelbedragvoordele betaalbaar deur Pensioen-/Voorsorgs-/Uittredingannuïteitsfonds by onttrekking deur of uittreding of afsterwe van 'n lid.
Die voorgeskrewe vorm „ A" of " B " wat deur die Fonds ingedien moet word, moet in tweevoud ingevul en saam met hierdie versoek ingestuur word.

4. BEPALING VAN AFTREKKINGS VAN ENKELBEDRAGVOORDELE BETAALBAAR.

(i) Aard van voordeel

(ii) Bedrag van voordeel betaalbaar

5. BESONDERHEDE VAN WERKGEWER AAN WIE AANWYSING UITGEREIK MOET WORD.

(a) Handelsnaam (blokletters)

(b) Besigheidsadres

(c) In die geval van Staatsdepartemente, Spoorweg- of Provinsiale Administrasie, meld die naam van die Tak, Afdeling of Seksie waarheen die aanwysing gestuur moet word

Datum .... Handtekening.

I.R.P. 4.

REPUBLIC OF SOUTH AFRICA.—*REPUBLIEK VAN SUID-AFRIKA.*

DEPARTMENT OF INLAND REVENUE.—*DEPARTEMENT VAN BINNELANDSE INKOMSTE.*

EMPLOYEES' TAX REMITTANCE RETURN.—*OPGAWE VIR BETALING VAN WERKNEMERSBELASTING.*

Month
Maand 19

1 Reference Number, name and address of Employer
Verwysingsnommer, naam en adres van werkgewer

Total employees' tax deducted during above-mentioned month/*Totale werknemers belasting gedurende bogemelde maand afgetrek* R

- The collections remitted herewith must be allocated according to the province(s) of residence of the employees and shown in portion 2A below/*Die invorderings wat hierby betaal word, moet toegedeel word ooreenkomstig die provinsie(s) waarin die werknemers woonagtig is en moet in gedeelte 2A hieronder aangetoon word.*
- Deductions in respect of employees not resident in South Africa must be included in the amount shown opposite the province from which they are paid/*Aftrekkings ten opsigte van werknemers wat nie in Suid-Afrika woonagtig is nie, moet by die bedrag getoon teenoor die provinsie waarvandaan hulle betaal word, ingesluit word.*
- If no employees' tax has been deducted during this month state " NIL " in section 2A below/*Indien geen werknemersbelasting gedurende hierdie maand afgetrek is nie, meld „ NUL " in gedeelte 2A hieronder.*

- The information required in portion 2B below, relates to ALL employees irrespective of whether or not employees' tax was deducted from their remuneration/*Die inligting wat in gedeelte 2B hieronder verlang word, het betrekking op ALLE werknemers ongeag of werknemersbelasting van hul besoldiging afgetrek is, al dan nie.*
- If no remuneration has been paid during this month, state " NIL " in section 2B below/*Indien geen besoldiging gedurende hierdie maand betaal is nie, meld „ NUL " in gedeelte 2B hieronder.*

2.

A. Employees' tax deducted for the Month
Werknemersbelasting afgetrek vir die maand 19 ,
in respect of employees resident in—
ten opsigte van werknemers woonagtig in—

Cape/*Kaap*	(1)	R
Natal	(2)	R
O.F.S./*O.V.S.*	(3)	R
Transvaal	(4)	R
Total/*Totaal*		R

I.R.P. 4.

B. Total number of persons employed
Totale getal persone gedurende die during the month
maand in diens
Total remuneration paid
Totale besoldiging betaal R

COUNTERFOIL OF RECEIPT.
TEENBLAD VAN KWITANSIE.

3.

Employees' tax deducted—month
Werknemersbelasting afgetrek — maand
19

This receipt is not valid unless printed in Cash Register figures/
Hierdie kwitansie is nie geldig nie tensy in Kasregistersyfers gedruk.

I.R.P. 4.

CASH REGISTER RECEIPT.
KASREGISTERKWITANSIE.

I.R.P. 5 (a).

REPUBLIC OF SOUTH AFRICA
DEPARTMENT OF INLAND REVENUE
EMPLOYEES' TAX CERTIFICATE

REPUBLIEK VAN SUID-AFRIKA
DEPARTEMENT VAN BINNELANDSE INKOMSTE
WERKNEMERSBELASTINGSERTIFIKAAT

TAX YEAR 19.................... BELASTINGJAAR

DUPLICATE—DUPLIKAAT

FULL NAME AND ADDRESS OF EMPLOYEE (State whether Mr., Mrs. or Miss) VOLLE NAAM EN ADRES VAN WERKNEMER (Meld of Mnr., Mev. of Mej.)	TRADE NAME AND REGISTERED ADDRESS OF EMPLOYER OR BRANCH HANDELSNAAM EN GEREGISTREERDE ADRES VAN WERKGEWER OF TAK
....	.... ⟵ Employer's Registration Reference Number / Werkgewer se Registrasie-verwysingsnommer

Period Employed Tydperk in diens	From..............................19........ To..............................19........	Pens./Provident Fund Number Pens.-/voorsorgsfondsnommer	HUSBAND'S FIRST NAMES (In the case of a married woman) MAN SE VOORNAME (In die geval van 'n getroude vrou) ....

Employee's Income Tax Number Werknemer se Inkomstebelasting-nommer	Revenue Office where Employee is on Charge Inkomstekantoor waar Werknemer op register is	Gross Remuneration Bruto Besoldiging	Re-Imbursive Allowance Vergoedende toelae	Pension Fund Contributions Pensioenfonds-bydraes	Benefit/Provident Fund Contributions Bystands-/Voorsorgs-fondsbydraes	Medical Benefit Fund Contributions Mediese Bystands-fondsbydraes	Insurance Assuransie	Employees Tax Deducted Werknemers-belasting afgetrek
....	....	R....................	R....................	R....................	R....................	R....................	R....................	R....................

Wording "DUPLICATE—DUPLIKAAT" to be printed in red.— Bewoording „DUPLICATE—DUPLIKAAT" moet in rooi gedruk word.

I.R.P. 5 (*b*).

REPUBLIC OF SOUTH AFRICA.—*REPUBLIEK VAN SUID-AFRIKA.*

DEPARTMENT OF INLAND REVENUE.—*DEPARTEMENT VAN BINNELANDSE INKOMSTE.*

RECONCILIATION OF TAX DEDUCTIONS MADE AND OF STOCK OF CERTIFICATES ON HAND.
REKONSILIASIE VAN BELASTINGAFTREKKINGS GEMAAK EN VAN VOORRAAD SERTIFIKATE VOORHANDE.

TAX YEAR—*BELASTINGJAAR* 19.......

The Receiver of Revenue,
Die Ontvanger van Inkomste,

....

....

Employer's Registration Number.
Werkgewer se registrasienommer.

A.—EMPLOYEES' TAX DEDUCTED.

Copies of certificates issued to employees in respect of employees' tax deducted from remuneration paid during the year ended the last day of February, 19....... are enclosed.

A.—WERKNEMERSBELASTING AFGETREK.

Afskrifte van sertifikate wat aan werknemers uitgereik is ten opsigte van werknemersbelasting afgetrek van besoldiging betaal gedurende die jaar geëindig die laaste dag van Februarie 19......, is ingesluit.

Total of employees' Tax as per above-mentioned certificates (I.R.P. 5)
Totaal van werknemers Belasting soos per bogemelde sertifikate (I.R.P. 5)........ R..............

Total amount of employees' Tax paid to the Receiver of Revenue during the year
Totale bedrag aan werknemers Belasting gedurende jaar aan Ontvanger van Inkomste betaal........ R..............

Difference/*Verskil*........ R..............

The difference is accounted for as follows/*Die verskil word as volg verklaar*..............................

....

....

....

....

B. Stock of Employees' Tax Certificates [I.R.P. 5 and I.R.P. 5 (*a*)].
Voorraad Werknemersbelastingsertifikate [I.R.P. 5 en I.R.P. 5 (a)].

(i) Certificates (I.R.P. 5) received from Department of Inland Revenue—
Sertifikate (I.R.P. 5) van Departement van Binnelandse Inkomste ontvang—

From No. / *Vanaf No.*.............. to / *tot*.............. Number / *getal*..............

From No. / *Vanaf No.*.............. to / *tot*.............. number / *getal*.............. ....

Certificates issued to employees or cancelled—
Sertifikate aan werknemers uitgereik of gekanselleer—

From No. / *Vanaf No.*.............. to / *tot*.............. number / *getal*..............

From No. / *Vanaf No.*.............. to / *tot*.............. number / *getal*.............. ....

Balance on hand/*Balans voorhande*

From No. / *Vanaf No.*.............. to / *tot*.............. number / *getal*.............. ....

(ii) Duplicate Certificates [I.R.P. 5 (*a*)] received from Department of Inland Revenue—
Duplikaatsertifikate [I.R.P. 5 (a)] ontvang van Departement van Binnelandse Inkomste—

From No. / *Vanaf No.*.............. to / *tot*.............. number / *getal*..............

From No. / *Vanaf No.*.............. to / *tot*.............. number / *getal*.............. ....

Certificates issued or cancelled—
Sertifikate uitgereik of gekanselleer—

From No. / *Vanaf No.*.............. to / *tot*.............. number / *getal*..............

From No. / *Vanaf No.*.............. to / *tot*.............. number / *getal*.............. ....

Balance on hand/*Balans voorhande*

From No. / *Vanaf No.*.............. to / *tot*.............. number / *getal*.............. ....

Employer's Trade Name
Handelsnaam van Werkgewer..............................

Address
Adres..............................

I certify that the above particulars are true and correct in every respect.
Ek sertifiseer dat bostaande gegewens in alle opsigte waar en korrek is.

Date
Datum..............................

....
Signature of employer or representative employer.
Handtekening van werkgewer of verteenwoordigende werkgewer.

I.R.P. 6.

1 REPUBLIC OF SOUTH AFRICA.—*REPUBLIEK VAN SUID-AFRIKA.*

DEPARTMENT OF INLAND REVENUE.—*DEPARTEMENT VAN BINNELANDSE INKOMSTE.*

RETURN FOR PAYMENT OF PROVISIONAL TAX.—*OPGAWE VIR BETALING VAN VOORLOPIGE BELASTING.*

This return must be completed by provisional taxpayers as defined in the Fourth Schedule to the Income Tax Act.

The amount of tax must be paid and this form must be submitted not later than the end of the fourth, seventh and last month of the year of assessment or on such other date as the Receiver of Revenue may approve.

Hierdie opgawe moet deur voorlopige belastingpligtiges, soos omskryf in die Vierde Bylae by die Inkomstebelastingwet, ingevul word.

Die bedrag belasting moet betaal word en hierdie vorm moet ingedien word nie later nie as die end van die vierde, sewende en laaste maand van die jaar van aanslag of sodanige ander datum as wat die Ontvanger van Inkomste mag goedkeur.

Name, Address and Reference Number of Provisional Taxpayer.
Naam, Adres en Verwysingnommer van Voorlopige Belastingpligtige.

Change of Postal Address.
Verandering van Posadres.

Insert new postal address if changed since last return.
Vul in nuwe posadres indien dit sedert vorige opgawe verander het.

A. YEAR OF ASSESSMENT ENDING—*JAAR VAN AANSLAG EINDIGENDE*______19____

*1. Provisional Tax payment for the / *Betaling van Voorlopige belasting vir die*

First. *Eerste.*	Second. *Tweede.*	Third. *Derde.*

period. / *tydperk.*

2. Province in which resident.
*Provinsie waarin woonagtig*______

3. Total taxable income as determined for the preceding year
Totale belasbare inkomste soos vir die voorafgaande jaar bepaal........ R______

*Make a " X " in the block which applies.
Maak 'n „ X " in die blok wat van toepassing is.

B. ESTIMATE OF TAXABLE INCOME FOR THE CURRENT YEAR OF ASSESSMENT.
SKATTING VAN BELASBARE INKOMSTE VIR DIE LOPENDE JAAR VAN AANSLAG.

1. Estimated taxable income for the year (excluding dividends)
Geskatte belasbare inkomste vir die jaar (uitgesondered dividende)........ R______

2. Estimated taxable portion of dividends
Geskatte belasbare gedeelte van dividende........ R______

Estimated total taxable income
Geskatte totale belasbare inkomste........(*a*) R______

C. CALCULATION OF PROVISIONAL TAX PAYABLE/*BEREKENING VAN VOORLOPIGE BELASTING BETAALBAAR.*

Tax on / *Belasting op* R______(*a*) for full year / *vir volle jaar*........(*b*) R______

Provisional tax for the period of / *Voorlopige belasting vir die tydperk van*______months / *maande* $= \frac{\quad}{12} \times \frac{\quad}{}$ (*b*) = R______

LESS—*MIN:*

(i) Provisional tax previously paid in respect of this year of assessment
Voorlopige belasting voorheen ten opsigte van hierdie jaar van aanslag betaal....... R______

* (ii) Employees' tax deducted by employer during the period of *three months/six months/twelve months* from 1st March, 19____
Werknemersbelasting deur werkgewer afgetrek gedurende die tydperk van drie maande/ses maande/twaalf maande *vanaf 1 Maart* 19____....... R______ R______

*Delete the periods in italics which do not apply.
Haal die kursiefgedrukte tydperke wat nie van toepassing is nie, deur.

PROVISIONAL TAX PAYABLE (Remittance herewith)
VOORLOPIGE BELASTING BETAALBAAR (Betaling hierby)........ R______

Signature of Provisional Taxpayer or Representative Taxpayer.
Handtekening van Voorlopige Belastingpligtige of Verteenwoordigende Belastingpligtige.

2 PROVISIONAL TAX.—*VOORLOPIGE BELASTING*

Cash Register Counterfoil.
Kasregisterteenblad.

Name, Address and Ref. No.
Naam, Adres en Verw. No.

Tax Year 19____
Belastingjaar 19____

3 PROVISIONAL TAX.—*VOORLOPIGE BELASTING.*

Name, Address and Ref. No.
Naam, Adres en Verw. No.

Tax Year 19____
Belastingjaar 19____

Cash Register Receipt.
Kasregisterkwitansie.

Table A.
Tabel A.

MONTHLY TABLE—MARRIED AND SINGLE.
MAANDELIKSE TABEL—GETROUD EN ONGETROUD.

Monthly Remuneration. *Maandelikse besoldiging.*	Annual Equivalent. *Jaarlikse ekwivalent.*	Tax: Married.—*Belasting: Getroud.* M. *G.*	M. 1. *G. 1.*	M. 2. *G. 2.*	M. 3. *G. 3.*	M. 4. *G. 4.*	M. 5. *G. 5.*	M. 6. *G. 6.*	Monthly Remuneration. *Maandelikse besoldiging.*	Tax: Single. *Belasting: Ongetroud.* S. *O.*	S. 1. *O. 1.*	S. 2. *O. 2.*
R	R	R	R	R	R	R	R	R	R	R	R	R
96–100	1,170	2.71	1.02	1.02	1.02	1.02	1.02	1.02	96–100	6.82	3.14	1.37
101–105	1,230	3.31	1.10	1.10	1.10	1.10	1.10	1.10	101–105	7.48	3.80	1.45
106–110	1,290	3.90	1.17	1.17	1.17	1.17	1.17	1.17	106–110	8.14	4.46	1.52
111–115	1,350	4.50	1.25	1.25	1.25	1.25	1.25	1.25	111–115	8.80	5.12	1.60
116–120	1,410	5.09	1.41	1.32	1.32	1.32	1.32	1.32	116–120	9.46	5.78	2.10
121–125	1,470	5.69	2.01	1.40	1.40	1.40	1.40	1.40	121–125	10.12	6.44	2.76
126–130	1,530	6.28	2.60	1.47	1.47	1.47	1.47	1.47	126–130	10.78	7.10	3.42
131–135	1,590	6.83	3.15	1.50	1.50	1.50	1.50	1.50	131–135	11.44	7.76	4.08
136–140	1,650	7.35	3.67	1.50	1.50	1.50	1.50	1.50	136–140	12.10	8.42	4.74
141–145	1,710	7.87	4.19	1.50	1.50	1.50	1.50	1.50	141–145	12.76	9.08	5.40

Table B.
Tabel B.

WEEKLY TABLE—MARRIED AND SINGLE.
WEEKLIKSE TABEL—GETROUD EN ONGETROUD.

Weekly Remuneration. *Weeklikse besoldiging.*	Annual Equivalent. *Jaarlikse ekwivalent.*	Tax: Married.—*Belasting: Getroud.* M. *G.*	M. 1. *G. 1.*	M. 2. *G. 2.*	M. 3. *G. 3.*	M. 4. *G. 4.*	M. 5. *G. 5.*	M. 6. *G. 6.*	Weekly Remuneration. *Weeklikse besoldiging.*	Tax: Single. *Belasting: Ongetroud.* S. *O.*	S. 1. *O. 1.*	S. 2. *O. 2.*
R	R	R	R	R	R	R	R	R	R	R	R	R
35–36	1,846	2.09	1.24	0.39	0.35	0.35	0.35	0.35	35–36	3.29	2.44	1.59
37–38	1,950	2.30	1.45	0.60	0.35	0.35	0.35	0.35	37–38	3.55	2.70	1.85
39–40	2,054	2.50	1.65	0.80	0.35	0.35	0.35	0.35	39–40	3.82	2.97	2.12
41–42	2,158	2.71	1.86	1.01	0.35	0.35	0.35	0.35	41–42	4.06	3.21	2.36
43–44	2,262	2.92	2.07	1.22	0.35	0.35	0.35	0.35	43–44	4.29	3.44	2.59
45–46	2,366	3.13	2.28	1.43	0.45	0.35	0.35	0.35	45–46	4.52	3.67	2.82
47–48	2,470	3.34	2.49	1.64	0.66	0.35	0.35	0.35	47–48	4.78	3.93	3.08
49–50	2,574	3.54	2.69	1.84	0.87	0.35	0.35	0.35	49–50	5.04	4.19	3.34
51–52	2,678	3.75	2.90	2.05	1.08	0.35	0.35	0.35	51–52	5.30	4.45	3.60
53–54	2,782	3.96	3.11	2.26	1.28	0.35	0.35	0.35	53–54	5.56	4.71	3.86

Table C.
Tabel C.

DAILY TABLE—MARRIED AND SINGLE.
DAAGLIKSE TABEL—GETROUD EN ONGETROUD.

Daily Remuneration. *Daaglikse besoldiging.*	Annual Equivalent. *Jaarlikse ekwivalent.*	Tax: Married.—*Belasting: Getroud.* M. *G.*	M. 1. *G. 1.*	M. 2. *G. 2.*	M. 3. *G. 3.*	M. 4. *G. 4.*	M. 5. *G. 5.*	M. 6. *G. 6.*	Daily Remuneration. *Daaglikse besoldiging.*	Tax: Single. *Belasting: Ongetroud.* S. *O.*	S. 1. *O. 1.*	S. 2. *O. 2.*
R	R	R	R	R	R	R	R	R	R	R	R	R
1.60	584	0.01	0.01	0.01	0.01	0.01	0.01	0·01	1.60	0.02	0.02	0.02
1.70	621	0.01	0.01	0.01	0.01	0.01	0.01	0·01	1.70	0.03	0.02	0.02
1.80	657	0.01	0.01	0.01	0.01	0.01	0.01	0·01	1.80	0.04	0.02	0.02
1.90	694	0.01	0.01	0.01	0.01	0.01	0.01	0·01	1.90	0.05	0.02	0.02
2.00	730	0.01	0.01	0.01	0.01	0.01	0.01	0·01	2.00	0.06	0.03	0.03
2.10	767	0.02	0.02	0.02	0.02	0.02	0.02	0·02	2.10	0.08	0.03	0.03
2.20	803	0.02	0.02	0.02	0.02	0.02	0.02	0·02	2.20	0.09	0.03	0.03
2.30	840	0.02	0.02	0.02	0.02	0.02	0.02	0·02	2.30	0.10	0.03	0.03
2.40	876	0.02	0.02	0.02	0.02	0.02	0.02	0·02	2.40	0.12	0.03	0.03
2.50	913	0.02	0.02	0.02	0.02	0.02	0.02	0·02	2.50	0.13	0.03	0.03

Table D.
Tabel D.

ANNUAL TABLE—MARRIED AND SINGLE.
JAARLIKSE TABEL—GETROUD EN ONGETROUD.

Annual Remuneration. *Jaarlikse Besoldiging.*	Tax: Married. *Belasting: Getroud.*							Annual Remuneration. *Jaarlikse Besoldiging.*	Tax: Single. *Belasting: Ongetroud.*		
	M. *G.*	M. 1. *G. 1.*	M. 2. *G. 2.*	M. 3. *G. 3.*	M. 4. *G. 4.*	M. 5. *G. 5.*	M. 6. *G. 6.*		S. *O.*	S. 1. *O. 1.*	S. 2. *O. 2.*
R	R	R	R	R	R	R	R	R	R	R	R
1,001–1,050	1·540	10.20	10.20	10·20	10.20	10.20	10.20	1,001–1,050	62.81	18·61	14.40
1,051–1,100	2·120	10.80	10.80	10·80	10.80	10.80	10.80	1,051–1,100	62.26	25.06	15.00
1,101–1,150	2·730	11.70	11.70	11·70	11.70	11.70	11.70	1,101–1,150	76.01	31.81	15.90
1,151–1,200	3·310	12.30	12.30	12·30	12.30	12.30	12.30	1,151–1,200	82.46	38.26	16.50
1,201–1,250	3·920	13.20	13.20	13·20	13.20	13.20	13.20	1,201–1,250	89.21	45.01	17.40
1,251–1,300	45.00	13.80	13.80	13·80	13.80	13.80	13.80	1,251–1,300	96.66	51.46	18.00
1,301–1,350	51.10	14.70	14.70	14·70	14.70	14.70	14.70	1,301–1,350	102.41	58.21	18.90
1,351–1,400	56.90	15.30	15.30	15·30	15.30	15.30	15.30	1,351–1,400	108.86	64.66	20,46
1,401–1,450	63.00	18.80	16.20	16·20	16.20	16.20	16.20	1,401–1,450	115.61	71.41	27.21
1,451–1,500	68.80	24.60	16.80	16·80	16.80	16.80	16.80	1,451–1,500	122.06	77.86	33.66

Table E.
Tabel E.

MARRIED WOMEN—MONTHLY TABLE.
GETROUDE VROUE—MAANDELIKSE TABEL.

MARRIED WOMEN—WEEKLY TABLE.
GETROUDE VROUE—WEEKLIKSE TABEL.

Monthly Remuneration. *Maandelikse Besoldiging.*	Annual Equivalent. *Jaarlikse Ekwivalent.*	Tax. *Belasting.*	Monthly Remuneration. *Maandelikse besoldiging.*	Annual Equivalent. *Jaarlikse ekwivalent.*	Tax. *Belasting.*	Weekly Remuneration. *Weeklikse besoldiging.*	Annual Equivalent. *Jaarlikse ekwivalent.*	Tax. *Belasting.*
R	R	R	R	R	R	R	R	R
1–10	90	—	231–235	2,790	32.43	1– 2	52	—
11–15	150	—	236–240	2,850	33.84	3– 4	156	—
16–20	210	0.18	241–245	2,910	35.28	5– 6	260	0.06
21–25	270	0.30	246–250	2,970	36.75	7– 8	364	0.12
26–30	330	0.45	251–255	3,030	38.25	9–10	468	0.21
31–35	390	0.63	256–260	3,090	39.78	11–12	572	0.31
36–40	450	0.84	261–265	3,150	41.34	13–14	676	0.43
41–45	510	1.08	266–270	3,210	42.93	15–16	780	0.58
46–50	570	1.35	271–275	3,270	44.55	17–18	884	0.75
51–55	630	1.65	276–280	3,330	46.20	19–20	988	0.93

Table F.
Tabel F.

MARRIED WOMEN—DAILY TABLE.
GETROUDE VROUE—DAAGLIKSE TABEL.

Daily Remuneration (Nearest 10c). *Daaglikse besoldiging (naaste 10c).*	Annual Equivalent. *Jaarlikse ekwivalent.*	Tax. *Belasting.*	Daily Remuneration (Nearest 10c). *Daaglikse besoldiging (naaste 10c).*	Annual Equivalent. *Jaarlikse ekwivalent.*	Tax. *Belasting.*	Daily Remuneration (Nearest 10c). *Daaglikse besoldiging (naaste 10c).*	Annual Equivalent. *Jaarlikse ekwivalent.*	Tax. *Belasting.*
10c–R1.	R	R	R4·10–R5.	R	R	R8·10–R9.	R	R
0.10	36	—	4.10	1,497	0.30	8.10	2,957	1.19
0.20	73	—	4.20	1,533	0.32	8.20	2,993	1.22
0.30	109	—	4.30	1,570	0.33	8.30	3,030	1.25
0.40	146	—	4.40	1,606	0.35	8.40	3,066	1.28
0.50	182	—	4.50	1,643	0.36	8.50	3,103	1.31
0.60	219	—	4.60	1,679	0.38	8.60	3,139	1.34
0.70	255	—	4.70	1,716	0.40	8.70	3,176	1.38
0.80	292	—	4.80	1,752	0.42	8.80	3,212	1.41
0.90	329	0.01	4.90	1,789	0.43	8.90	3,249	1.44
1.00	365	0.01	5.00	1,825	0.45	9.00	3,285	1.47

Table G.
Tabel G.

MARRIED WOMEN—ANNUAL TABLE.
GETROUDE VROUE—JAARLIKSE TABEL.

Annual Remuneration. *Jaarlikse besoldiging.*	Tax. *Belasting.*	Annual Remuneration. *Jaarlikse besoldiging.*	Tax. *Belasting.*	Annual Remuneration. *Jaarlikse besoldiging.*	Tax. *Belasting.*	Annual Remuneration. *Jaarlikse besoldiging.*	Tax. *Belasting.*	Annual Remuneration. *Jaarlikse besoldiging.*	Tax. *Belasting.*
R	R	R	R	R	R	R	R	R	R
—	—	1,001–1,025	51.21	2,001–2,025	202.41	3,001–3,025	453.61	4,001–4,025	804.81
0– 50	—	1,026–1,050	53.77	2,026–2,050	207.47	3,026–3,050	461.17	4,026–4,050	814.87
51– 75	0.19	1,051–1,075	56.39	2,051–2,075	212.59	3,051–3,075	468.79	4,051–4,075	824.99
76–100	0.38	1,076–1,100	59.08	2,076–2,100	217.78	3,076–3,100	476.48	4,076–4,100	835.18
101–125	0.63	1,101–1,125	61.83	2,101–2,125	223.03	3,101–3,125	484.23	4,101–4,125	845.43
126–150	0.94	1,126–1,150	64.64	2,126–2,150	228.34	3,126–3,150	492.04	4,126–4,150	855.74
151–175	1.31	1,151–1,175	67.51	2,151–2,175	233.71	3,151–3,175	499.91	4,151–4,175	866.11
176–200	1.75	1,176–1,200	70.45	2,176–2,200	239.15	3,176–3,200	507.84	4,176–4,200	876.55
201–225	2.25	1,201–1,225	73.45	2,201–2,225	244.65	3,201–3,225	515.85	4,201–4,225	887.05
226–250	2.80	1,226–1,250	76.51	2,226–2,250	250.21	3,226–3,250	523.91	4,226–4,250	897.61

Table H.
Tabel H.

MONTHLY TABLE — NON-RESIDENTS: MARRIED AND SINGLE.
MAANDELIKSE TABEL — NIE-WOONAGTIGES: GETROUD EN ONGETROUD.

Monthly Remuneration. *Maandelikse besoldiging.*	Annual Equivalent. *Jaarlikse ekwivalent.*	Tax: Married. *Belasting: Getroud.* M. *G.*	M. 1. *G. 1.*	M. 2. *G. 2.*	M. 3. *G. 3.*	M. 4. *G. 4.*	M. 5. *G. 5.*	M. 6. *G. 6.*	Monthly Remuneration. *Maandelikse besoldiging.*	Tax: Single. *Belasting: Ongetroud.* S. *O.*	S. 1. *O. 1.*	S. 2. *O. 2.*
R	R	R	R	R	R	R	R	R	R	R	R	R
96–100	1,170	1.30	—	—	—	—	—	—	96–100	4.19	1.35	—
101–105	1,230	1.70	—	—	—	—	—	—	101–105	4.64	1.80	—
106–110	1,290	2.10	—	—	—	—	—	—	106–110	5.09	2.25	—
111–115	1,350	2.50	—	—	—	—	—	—	111–115	5.54	2.70	—
116–120	1,410	2.90	0.06	—	—	—	—	—	116–120	5.99	3.15	0.32
121–125	1,470	3.30	0.46	—	—	—	—	—	121–155	6.44	3.60	0.77
126–130	1,530	3.70	0.86	—	—	—	—	—	126–130	6.89	4.05	1.22
131–135	1,590	4.10	1.26	—	—	—	—	—	131–135	7.34	4.50	1.67
136–140	1,650	4.50	1.66	—	—	—	—	—	136–140	7.79	4.95	2.12
141–145	1,710	4.90	2.06	—	—	—	—	—	141–145	8.24	5.40	2.57

Table I.
Tabel I.

ANNUAL TABLE — NON-RESIDENTS: MARRIED AND SINGLE.
JAARLIKSE TABEL— NIE-WOONAGTIGES: GETROUD EN ONGETROUD.

Annual Remuneration. *Jaarlikse besoldiging.*	M. *G.*	Tax: Married. *Belasting: Getroud.* M. 1. *G. 1.*	M. 2. *G. 2.*	M. 3. *G. 3.*	M. 4. *G. 4.*	M. 5. *G. 5.*	M. 6. *G. 6.*	Annual Remuneration. *Jaarlikse besoldiging.*	Tax: Single. *Belasting: Ongetroud.* S. *O.*	S. 1. *O. 1.*	S. 2. *O. 2.*
R	R	R	R	R	R	R	R	R	R	R	R
1,001–1,050	4.00	—	—	—	—	—	—	1,001–1,050	37.25	3.25	—
1,051–1,100	8.00	—	—	—	—	—	—	1,051–1,110	41.75	7.75	—
1,101–1,150	12.00	—	—	—	—	—	—	1,101–1,150	46.25	12.25	—
1,151–1,200	16.00	—	—	—	—	—	—	1,151–1,200	50.75	16.75	—
1,201–1,250	20.00	—	—	—	—	—	—	1,201–1,250	55.25	21.55	—
1,251–1,300	24.00	—	—	—	—	—	—	1,251–1,300	59.75	25.75	—
1,301–1,350	28.00	—	—	—	—	—	—	1,301–1,350	64.25	30.25	—
1,351–1,400	32.00	—	—	—	—	—	—	1,351–1,400	68.75	34.75	0.75
1,401–1,450	36.00	2.00	—	—	—	—	—	1,401–1,450	73.25	39.25	5.25
1,451–1,500	40.00	6.00	—	—	—	—	—	1,451–1,500	77.75	43.75	9.75

Table J.
Tabel J.

WEEKLY TABLE — BANTU: MARRIED AND SINGLE.
WEEKLIKSE TABEL — BANTOE: GETROUD EN ONGETROUD.

Weekly Remuneration. *Weeklikse besoldiging.*	Annual Equivalent. *Jaarlikse ekwivalent.*	Tax: Married. *Belasting: Getroud.* M. *G.*	M. 1. *G. 1.*	M. 2. *G. 2.*	M. 3. *G. 3.*	M. 4. *G. 4.*	M. 5. *G. 5.*	M. 6. *G. 6.*	Weekly Remuneration. *Weeklikse besoldiging.*	Tax: Single. *Belasting: Ongetroud.* S. *O.*	S. 1. *O. 1.*	S. 5. *O. 2.*
R	R	R	R	R	R	R	R	R	R	R	R	R
35–36	1,846	1.74	0.89	0.04	—	—	—	—	35–36	2.78	1.93	1.08
37–38	1,950	1.95	1.10	0.25	—	—	—	—	37–38	3.01	2.16	1.31
39–40	2,054	2.16	1.31	0.46	—	—	—	—	39–40	3.25	2.40	1.55
41–42	2,158	2.36	1.51	0.55	—	—	—	—	41–42	3.48	2.63	1.78
43–44	2,262	2.57	1.72	0.87	—	—	—	—	43–44	3.71	2.86	2.01
45–46	2,366	2.78	1.93	1.08	0.11	—	—	—	45–46	3.95	3.10	2.25
47–48	2,470	2.99	2.14	1.29	0.31	—	—	—	47–48	4.20	3.65	2.50
49–50	2,574	3.20	2.35	1.50	0.52	—	—	—	49–50	4.46	3.61	2.76
51–52	2,678	3.40	2.55	1.70	0.73	—	—	—	51–52	4.72	3.87	3.02
53–54	2,782	3.61	2.76	1.91	0.94	—	—	—	53–54	4.98	4.13	3.28

MONTHLY TABLE — BANTU: MARRIED AND SINGLE.
MAANDELIKSE TABEL — BANTOE: GETROUD EN ONGETROUD.

Table K.
Tabel K.

Monthly Remuneration. *Maandelikse besoldiging.*	Annual Equivalent. *Jaarlikse ekwivalent.*	Tax: Married. *Belasting: Getroud.* M. *G.*	M. 1. *G. 1.*	M. 2. *G. 2.*	M. 3. *G. 3.*	M. 4. *G. 4.*	M. 5. *G. 5.*	M. 6. *G. 6.*	Monthly Remuneration. *Maandelikse besoldiging.*	Tax: Single. *Belasting: Ongetroud.* S. *O.*	S. 1. *O. 1.*	S. 2. *O. 2.*
R	R	R	R	R	R	R	R	R	R	R	R	R
96–100	1,170	1.69	—	—	—	—	—	—	96–110	5.45	1.76	—
101–105	1,230	2.21	—	—	—	—	—	—	101–105	6.03	2.35	—
106–110	1,290	2.73	—	—	—	—	—	—	106–110	6.62	2.93	—
111–115	1,350	3.25	—	—	—	—	—	—	111–115	7.20	3.52	—
116–120	1,410	3.77	0.09	—	—	—	—	—	116–120	7.79	4.10	0.4
121–125	1,470	4.29	0.61	—	—	—	—	—	121–125	8.37	4.69	1.01
126–130	1,530	4.81	1.13	—	—	—	—	—	126–130	8.96	5.27	1.59
131–135	1,590	5.33	1.65	—	—	—	—	—	131–135	9.54	5.86	2.18
136–140	1,650	5.85	2.17	—	—	—	—	—	136–140	10.13	6.44	2.76
141–145	1,710	6.37	2.69	—	—	—	—	—	141–145	10.71	7.03	3.35

DAILY TABLE — BANTU: MARRIED AND SINGLE.
DAAGLIKSE TABEL — BANTOE: GETROUD EN ONGETROUD.

Table L.
Tabel L.

Daily Remuneration. *Daaglikse besoldiging.*	Annual Equivalent. *Jaarlikse ekwivalent.*	Tax: Married. *Belasting: Getroud.* M. *G.*	M. 1. *G. 1.*	M. 2. *G. 2.*	M. 3. *G. 3.*	M. 4. *G. 4.*	M. 5. *G. 5.*	M. 6. *G. 6.*	Daily Remuneration. *Daaglikse besoldiging.*	Tax: Single. *Belasting: Ongetroud.* S. *O.*	S. 1. *O. 1.*	S. 2. *O. 2.*
R	R	R	R	R	R	R	R	R	R	R	R	R
6.60	2,409	0.41	0.29	0.17	0.03	—	—	—	6.60	0.58	0.45	0.33
6.70	2,446	0.42	0.30	0.18	0.04	—	—	—	6.70	0.59	0.47	0.35
6.80	2,482	0.43	0.31	0.19	0.05	—	—	—	6.80	0.60	0.48	0.36
6.90	2,519	0.44	0.32	0.20	0.06	—	—	—	6.90	0.61	0.49	0.37
7.00	2,555	0.45	0.33	0.21	0.07	—	—	—	7.00	0.63	0.51	0.39
7.10	2,592	0.46	0.34	0.22	0.08	—	—	—	7.10	0.64	0.52	0.40
7.20	2,628	0.47	0.35	0.23	0.09	—	—	—	7.20	0.65	0.53	0.41
7.30	2,665	0.48	0.36	0.24	0.10	—	—	—	7.30	0.67	0.55	0.42
7.40	2,701	0.49	0.37	0.25	0.11	—	—	—	7.40	0.68	0.56	0.44
7.50	2,738	0.50	0.38	0.26	0.12	—	—	—	7.50	0.69	0.57	0.45

ANNUAL TABLE — BANTU: MARRIED AND SINGLE.
JAARLIKSE TABEL — BANTOE: GETROUD EN ONGETROUD.

Table M.
Tabel M.

Annual Remuneration. *Jaarlikse besoldiging.*	Tax: Married. *Belasting: Getroud.* M. *G.*	M. 1. *G. 1.*	M. 2. *G. 2.*	M. 3. *G. 3.*	M. 4. *G. 4.*	M. 5. *G. 5.*	M. 6. *G. 6.*	Annual Remuneration. *Jaarlikse besoldiging.*	Tax: Single. *Belasting: Ongetroud.* S. *O.*	S. 1. *S. 1.*	S. 2. *S. 2.*
R	R	R	R	R	R	R	R	R	R	R	R
1,001–1,050	5.20	—	—	—	—	—	—	1,001–1,050	48.41	4.21	—
1,051–1,100	10.40	—	—	—	—	—	—	1,051–1,100	54.26	10.06	—
1,101–1,150	15.60	—	—	—	—	—	—	1,101–1,150	60.11	15.91	—
1,151–1,200	20.80	—	—	—	—	—	—	1,151–1,200	65.96	21.76	—
1,201–1,250	26.00	—	—	—	—	—	—	1,201–1,250	71.81	27.61	—
1,251–1,300	31.20	—	—	—	—	—	—	1,251–1,300	77.66	33.46	—
1,301–1,350	36.40	—	—	—	—	—	—	1,301–1,350	83.51	39.31	—
1,351–1,400	41.60	—	—	—	—	—	—	1,351–1,400	89.36	45.16	0.96
1,401–1,450	46.80	2.60	—	—	—	—	—	1,401–1,450	95.21	51.01	6.81
1,451–1,500	52.00	7.80	—	—	—	—	—	1,451–1,500	101.06	56.86	12.66

PART-TIME EMPLOYEES — *DEELTYDSE WERKNEMERS.*

Table N.
Tabel N.

DEDUCT EMPLOYEES' TAX FROM REMUNERATION PAID AT THE RATE OF 10 PER CENT.
TREK WERKNEMERSBELASTING AF TEEN 'N KOERS VAN 10 PERSENT VAN BESOLDIGING BETAAL.

The Government Printer, Pretoria. | Die Staatsdrukker, Pretoria.