

St. Vincent & the Grenadines National Insurance Services

Particulars of Employees employed during _____ [year]

- 1. Employer Registration Number _____
- 2. Employer Name ______
- 3. Nature of Business
- 4. Number of employees in your establishment
- 5. Males [] Females []
- 6. Gross pay of all employees \$_____
- 7. Total insurable earnings of all employees \$_____
- 8. Total NIS contributions deducted for the year (10%) \$
- 9. Address of Employer _____

10.Signature of Employer _____ Date _____

Form: C1A

NB: This form should be completed and submitted with the certified records of employee's earnings (Form C1/1) at the end of each year. In cases where employment terminated during the year the total insurable earnings and NIS deductions for those persons should still be included.



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