



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 (12%) \$ _____
9. Address of Employer _____

- Email address _____
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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