



# EMPLOYEE'S GUIDE TO NASSCORP SCHEMES

*Social Security – It touches the life of everyone!*

*Revised May 19, 2017*

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## 1.0 INTRODUCTION

Each of us works to earn an income. In fact, with a reasonable income, we can sustain ourselves, our families, and we can save for the future – the important things in life.

In spite of our best efforts, however, sometimes the income we make cannot fully sustain us, especially in times of great need. When hard times come, we often find that having a limited income makes it difficult to live, to provide for our families, and to save for the future. While our jobs may sometimes provide temporary assistance, we all know that in times of great need, we need more than just temporary assistance. This is why Social Security is important. Social Security can provide important income protection and safety by coming to your support when you are most in need. Most importantly, Social Security is long lasting and it treats us all fairly.

In Liberia, there are three Social Security plans (otherwise known as Schemes) operated by the National Social Security & Welfare Corporation (NASSCORP). These schemes are the Employment Injury Scheme (EIS), National Pension Scheme (NPS) and Welfare Scheme. These plans are designed to provide income protection to people in the event of injury, sickness, old age or death.

The goal of this *Employee's Guide* is to educate you about your rights, your obligations, and the benefits available to you under these social security plans. In each of the sections of this document, we will first describe your rights under the law, and then we will discuss your obligations and responsibilities, followed finally by the benefits you can enjoy under NASSCORP coverage.

You should treat this handbook as your most reliable source of information regarding how NASSCORP works to protect you and your family. Remember, Social Security protects all of us!

## **2.0 WHAT YOU NEED TO KNOW ABOUT THE SOCIAL SECURITY SCHEMES?**

### **2.1 What is NASSCORP?**

**Answer:** NASSCORP is the acronym or short form for National Social Security & Welfare Corporation. It was established by law on July 10, 1975 by the Liberian National Legislature and mandated to operate three Schemes or programs which provide support or relief to insured employees (and their dependents) in times of need. This law was revised February 13, 2017.

### **2.2 What are the three Schemes of NASSCORP?**

**Answer:** The three Schemes are:

1. Employment Injury Scheme (EIS);
2. National Pension Scheme (NPS); and
3. Welfare Scheme (WS).

However, the Welfare Scheme, which is non-contributory, is yet to be launched by Government.

### **2.3 How can I be covered by the Schemes?**

**Answer:** As long as you work with an employer who is registered with NASSCORP, and that employer has one or more employees, the employer must register you with NASSCORP and then you are covered.

### **2.4 What do you mean by “an employer who is registered with NASSCORP?”**

**Answer:** Under the Social Security law of Liberia, an employer who is registered with NASSCORP is an employer who has been assigned an employer registration code and issued an Employer Registration Certificate by NASSCORP.

### **2.5 What determines whether employees are covered under EIS or NPS?**

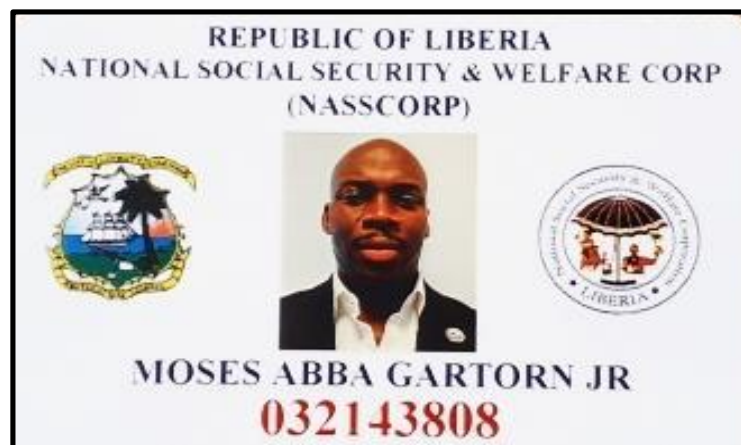
**Answer:** When a new employer is registered with NASSCORP, and that employer has one or more employees, the employer is required by law to register his/her business and employees with NASSCORP, obtain a Social Security ID Card and pay contributions on behalf of his/her employees to NASSCORP.

## 2.6 How do I get a Social Security number and Identification card?

**Answer:** Getting a Social Security number and Identification card is a very simple process. Just ask your employer to let you fill out a Social Security form called **Employee Registration Form**, otherwise known as **Form 2**. This form requires basic information about you and your dependents and you will be required to attach one (1) recent color passport sized photo to the form. When you have completed the form, return it to your employer who will then give the form and your photo to the nearest NASSCORP office for further processing. NASSCORP will then assign you a 9-digit Social Security number, produce an ID card for you, and send the card to you through your employer.

**Note:** Whenever you start a new job, your employer should have you fill out a Social Security **Employee Registration Form**, otherwise known as **Form 2**. Also, you must have a unique 9-digit Social Security ID number in order to claim any Social Security benefit.

### Sample of a Social Security ID card



## 2.7 What happens if I misplace my Social Security ID card?

**Answer:** If you misplace your ID card, you must inform your employer right away. Your employer will then inform the nearest Social Security Office in order to process a new ID card for you.

**Note:** Although your ID card was issued free of charge the first time, **YOU** will be charged a fee of US\$5.00 (or equivalent in L\$) for the reproduction of a misplaced, damaged or lost Social Security ID card.

## **2.8 How can I continue my coverage under the schemes if I change employer?**

**Answer:** If you should change employer, simply tell your new employer that you were covered by the NASSCORP Schemes under your previous employer and then show the new employer your ID card. Your new employer will then work with NASSCORP through its nearest Regional Office to update your records and transfer your contribution credits from your previous employer to your new employer.

## **3.0 The Employment Injury Scheme (EIS)**

### **3.1 What is the EIS?**

**Answer:** The EIS is a Social Security Scheme available to you when actively working. Started in February 1980, the EIS is designed to provide cash and material benefits to employees who sustain injuries or become disabled as a result of job-related accidents or occupational disease or to their families when they die from job-related accidents.

### **3.2 What are Job-Related Injury and Occupational Disease?**

**Answer: Job-related injury** is injury that you sustain in an accident

- when going to work,
- while at work, or near the place of work, and/or
- when on your way home from work within a reasonable time frame.

**Occupational disease** is an illness or disease that you may contract as a result of the work you perform.

### **3.3 Am I required to pay contributions in order to be covered by the EIS?**

**Answer:** No. Employees do not pay any contribution in order to be covered under the EIS. Under the Social Security law of Liberia, your employer pays to NASSCORP a monthly amount of 2% of your gross monthly earnings on your behalf. This amount is **NOT** deducted from your earnings. This is an example of typical EIS calculations.

*Sample of Earnings and EIS Contribution Deductions*

<b>Your Monthly Earnings</b>	<b>EIS %</b>	<b>Employer's Monthly Contribution</b>
\$200.00	2%	\$4.00
\$180.00	2%	\$3.60

**3.4 What are the benefits available under the EIS?**

**Answer:** Your benefits under the EIS are:

1. Medical Benefit (MB)
2. Temporary Disablement Benefit (TDB)
3. Permanent Disablement Benefit (PDB)
4. Constant Attendance Allowance (CAA)
5. Lump sum Death Benefit (LsDB)
6. Funeral Grant (FG)

**3.5 How do the EIS benefits work?**

**a. Medical Benefit (MB)**

NASSCORP is responsible to pay your medical bills accumulated from treatment received as a result of job-related injury or occupational illness. If **you pay** your medical bills and the receipts carry your name, **you** will be reimbursed by NASSCORP; if on the other hand, your **employer pays** the bill, the employer will be reimbursed. In addition to the payment of your medical bills, NASSCORP will provide **you** medical materials such as wheelchairs, eye glasses, prostheses, etc., based on the nature of your injury.

**b. Temporary Disablement Benefit (TDB)**

If you are unable to work for 14 or more days due to an injury from a job-related accident, you are entitled to TDB. The amount of this benefit is 65% of your last twelve months' average earnings before the accident. If your medical treatment continues for more than 14 days, you must obtain a medical report from an accredited medical institution signed by a licensed medical practitioner and submit it to NASSCORP for processing and payment of additional TDB to you until you return to work. If your condition remains unimproved and you

are unable to return to work, you must present an updated medical report every twenty-eight day from an accredited medical institution signed by a licensed medical doctor.

**c. Permanent Disablement Benefit (PDB)**

To qualify for PDB you must be examined by NASSCORP Medical Board in order to determine the extent or degree of your disability if any. If it is determined that you are in fact disabled, you will be awarded PDB which is paid to you for life.

**Note:** If you are not immediately invited to sit for a NASSCORP Medical Board examination, you must write a letter to the nearest NASSCORP Regional Office requesting a Medical Board examination. Your letter will be sent to the NASSCORP Medical Department which will invite you for the Medical Board examination at a time and date decided by the NASSCORP Management. If you live outside of Monrovia, NASSCORP will pay your transportation, accommodations, and meal costs to sit the Medical Board.

**d. Constant Attendance Allowance (CAA)**

If you are permanently disabled and you cannot take care of yourself (such as would be the case if you were paralyzed from a job-related accident), a person recommended by you will be hired by NASSCORP to serve as your personal attendant.

*The amount of compensation for the person serving as your personal attendant is 25% of your monthly PDB.*

**Note:** This 25% is an addition to your entitlement and is not deducted from your benefit. For example, if you are entitled to a monthly PDB of US\$200.00, your personal attendant will receive US\$50.00 each month.

**e. Lump sum Death Benefit**

If you die as a result of a job-related injury or occupational disease, your widow/widower and children (up to the age of 21 years) will receive Lump sum Death Benefits. If you were younger, you will be deemed as sixty years old. If sixty years and above, the benefit will be calculated in respect of your age upon death. ***See the chart below.***



Age Insured Employee Dies	Allotted Years of Benefit Payment
Age 60 and below	15 years
Age 65	10 years
Age 70	5 years
Age 75 or above	1 years

Your widow/widower will receive 20 % of Lump sum Death Benefit, and your children will receive 30%. Where no widow/widower and children the mother or father of the insured deceased employee will receive the Lump sum Death Benefit that would have been awarded to the widow or widower.

**Note:** If there is no widow/widower but there are children, the children will receive equal portion of the benefit in lump sum.

**Important:** To receive Lump sum Death Benefit (DB), the survivor and the employer **MUST** submit the following to NASSCORP:

- Formal transmittal letter from employer (to confirm date of employment)
- Form B-26 (to provide Accident Report from employer)
- Certificate of Death/Affidavit of Death
- Certificate of Marriage (traditional or civil law); or letter of attestation from prelate
- Group color photo (widow/widower and child/children)
- Police report in case of Commuting Accident, or two eyewitness statements in case of Industrial Accident
- C1 Form (bio-data and earning records)

#### **f. Funeral Grant**

The Funeral Grant is a fixed amount of US\$500 or its equivalent in Liberian Dollars which is given to whoever incurs funeral expenses of an insured deceased. The grant will be paid based on the currency in which contributions were paid on the deceased's behalf when she/he was alive and working.

### 3.6 How do I claim my benefits under EIS?

**Answer:** When you sustain a job-related injury, report the matter immediately to your employer who will report it to the nearest NASSCORP Regional Office.

**Note:** Your employer must report the incident to the Regional Office within 48 hours, or at most 14 days of the occurrence of the incident. You and your employer are required to ensure that the following are done in order to claim EIS benefits:

- Employer submits formal Employer’s transmittal letter, Form B-26 along with a color photo of the claimant (depicting a picture of the injury where applicable);
- You must submit the medical report and payment receipt(s);
- You must submit Police report in case of Commuting Accident, or two Eyewitness’ statements in case of Industrial Accident;
- Employer submits Form C-1 (Claimant’s Earning Record)

**NOTE:** Employer must submit all of the above mentioned documents to the nearest NASSCORP Regional Office for processing.

### 3.7 Where are the NASSCORP Regional Offices located?

**Answer:** NASSCORP has eight Regional Offices located in strategic areas all over the country. See information below:

REGION	COUNTY	OFFICE LOCATIONS
Region I	Montserrado	15 <sup>th</sup> Street & Payne Ave., Sinkor, Mon
Region II	Grand Bassa & River Cess	Robert & Tubman Street, opp. Catholic Mission
Region III	Bomi, Cape Mt. & Gbarpolu	Konveh Community, Tubmanburg, Bomi
Region IV	Margibi	Executive Ground, Kakata
Region V	Bong & Lofa	Executive Dr., Gboveh High Sch. Rd., Gbarnga
Region VI	Nimba	Glanu Community, Ganta, Nimba
Region VIII	Maryland, River Gee & G/Kru	Maryland Ave., Harper City
Region IX	Sinoe & Grand Gedeh	Johnstone Street, downtown Greenville

## 4.0 THE NATIONAL PENSION SCHEME (NPS)

### 4.1 What is NPS?

**Answer:** The NPS which started September 1988 is designed to provide cash benefits to elderly persons who retired from work; to persons who are incapable of work as a result of illness or disablement; and to survivors of deceased persons who were covered by the NPS. The NPS is a form of income replacement.

#### 4.1.1 How much cash benefit will I get when I retire?

**Answer:** Under the NPS, you are entitled to receive a minimum of 25% or a maximum of 40% of your average monthly earning.

### 4.2 Am I required to pay contributions in order to be covered by the NPS?

**Answer:** Yes. Under the NPS, you must pay 4% of your monthly gross earnings to NASSCORP as your contribution. Your 4% contribution will be deducted from your monthly gross earnings. Your employer will pay an additional 4% of your monthly gross earnings to NASSCORP as well. But this amount is **NOT** to be deducted from your earnings. Therefore, a total of 8% of your monthly gross earnings will be contributed to NASSCORP for your NPS coverage.

**Note:** If you want to keep track of your contributions, you can do so by reviewing your pay checks or you can ask your employer for a **Statement of Earnings** which is provided to them by NASSCORP.

*Sample of Earnings and NPS Contribution Deduction*

Your Monthly Earnings	Your 4% Contribution (deducted from your monthly earnings)	Employer 4% monthly contribution	Total 8% monthly NPS contribution
\$200.00	\$8.00	\$8.00	\$16.00
\$180.00	\$7.20	\$7.20	\$14.40

### 4.3 What are the benefits available under the NPS?

**Answer:** Benefits under the NPS are:

- i. Retirement Pension (RP)
- ii. Invalidity Pension (IP)
- iii. Survivor's Lump sum Benefit (SLsB)

#### **4.4 How do the NPS benefits work?**

**Answer:** Retirement Pension is cash benefit available to you when you reach age 60 or 65 years; also, if your doctor says that you can no longer work because you are too sick or injured to work. Even if you die your widow/widower and children (below age 21 years) will receive benefit from NASSCORP.

**NOTE:** Three months before reaching your 60<sup>th</sup> birthday, NASSCORP will inform you that you are about to reach your pensionable age. If you wish, you can also inform NASSCORP within the same time frame and indicate whether you wish to be retired. If your decision is to be retired, your employer will retire you and submit your name to NASSCORP for processing of your retirement pension.

#### **I. Retirement Pension (RP)**

#### **4.5 How do I qualify for Retirement Pension?**

**Answer:** To qualify for Retirement Pension, you must satisfy three conditions:

- i. Age Condition:** You must have reached age 60 and retired from work; or age 65 for compulsory retirement.
- ii. Contribution Payment Condition:** You must have paid a minimum of 100 monthly contributions (if born before 1980) or 144 monthly contributions (if born in 1980 and after).
- iii. Retirement Condition:** You must have retired from work.

In order to receive your pension, you **MUST** submit the following documents to the nearest NASSCORP Regional Office:

- Transmittal letter from your employer (to request and confirm your retirement from work)
- One recent color passport-sized photo
- Form C-1 (indicating last ten years earning records)

#### **4.6 Suppose I meet the age and retirement conditions but I have not made enough contributions?**

**Answer:** If you have paid at least 12 or more monthly contributions, you will receive a lump sum from NASSCORP in the form of Retirement Grant. This means all your 4% contributions paid will be refunded you with interest thereon.

**4.7 What happens to my retirement pension if I die while receiving it?**

**Answer:** Your retirement pension will be given to your family. Your widow/widower and children (below age 21 years) will receive your pension as Survivor's Lump sum Benefit (SLsB). If you were younger, you will be deemed as sixty years old. If sixty years and above, the SLsB will be calculated in respect of your age upon death.

**See the chart on Page 8.**

**4.8 What percentage of my earnings will I receive as retirement pension?**

**Answer:** The percentage of your earnings you will receive as a Retirement Pension depends on the number of months you made contributions to Your Social Security Pension Fund. For every 100 monthly contributions (for insured workers born before 1980) and 144 monthly contributions ((for insured workers born 1980 and after) that have been made to the fund in your name, you will receive 25% of the average of your best five years' salaries. Also, every 10 monthly contributions that you pay in addition to the 100 or 144 monthly contributions already paid, you will receive 1% increment to your pension rate. **Note:** The increment will not exceed 40%.

See the example below:

<b>Number of Contributions Paid</b>	<b>Rate of Pension (%)</b>
100/144	25%
110/154	26%
120/164	27%
130/174	28%
140/184	29%
150/194	30%

## **II. What is Invalidity Pension (IP)?**

**Answer:** “Invalidity” in this case refers to one's permanent inability to work due to a non-job-related injury, or contracting disease an Occupational disease. In these situations, where you are medically proven permanently incapable of working and despite the fact that you have not reached retirement (60 years and above), you will qualify for Invalidity Pension.

### **4.9 How can I qualify for Invalidity Pension?**

**Answer:** To qualify for Invalidity Pension you must satisfy two conditions:

- 1. Medical Condition:** You must be examined by the NASSCORP Medical Board to determine whether you are permanently disabled and totally incapable of work.
- 2. Contribution Condition:** You must have paid at least 50 monthly contributions, or you must have paid contributions for at least 2/3 of all possible months from the date you joined the Social Security Program.

### **4.10 How do I apply for Invalidity Pension?**

**Answer:** To apply for invalidity pension, you or your former employer must do the following:

- Write to NASSCORP through the Regional Office nearest you, state that you have been declared invalid or permanently unable to work by a recognized medical doctor and that you are now applying for invalidity pension under the NPS.
- Submit the letter along with a copy of the medical report declaring you invalid
- Submit a recent color passport-sized photo
- Submit Form C-1

**Note:** The minimum rate of Invalidity Pension is 25% of your average monthly earnings for life.

### **4.11 What happens to my Invalidity Pension if I did not pay 50 monthly contributions?**

**Answer:** If you did not pay at least 50 monthly contributions, but paid at least 12 or more monthly contributions, you will receive lump sum payment called an **Invalidity Grant**. This means that you will receive all of your 4% contributions paid on **your** behalf into the NPS with interest thereon.

### **III. What is Survivor's Lump sum Benefit (SLsB)?**

**Answer:** Should you die as a result of natural cause, before or after retirement, your widow/widower and children (up to the age of 21 years) will receive Survivor's Lump sum Benefit, if you paid fifty (50) or more monthly contributions. If you were younger, you will be deemed as sixty years old. If sixty and above the benefit will be calculated in respect of your age upon death. *See the chart on page 8.*

#### **4.12 What percentage of my earnings will my survivors/dependants receive?**

**Answer:** Should you die as a result of natural cause, before or after retirement, your widow/widower and your children (up to the age of 21 years) will receive your pension, if you paid 50 or more monthly contributions. If you die younger than sixty, you will be deemed sixty years old. If you die sixty years and above, your pension benefit will be calculated in respect of your age upon death. Where no widow/widower and children, your mother or father will receive the share of the benefit that would have been awarded to the widow or widower.

**NOTE:** If there is no widow/widower but there are children, the children will receive equal share of your pension as provided for by law.

#### **4.13 How can my survivors qualify for Survivor's Lump sum Benefit?**

**Answer:** In order for your survivors to qualify for Survivor's Lump sum Benefit, you must have first paid a minimum of **50 monthly contributions** into the NPS before your death. Following your death, your dependents will then be qualified for Survivor's Lump sum Benefit.

#### **4.14 How can my survivors claim the Survivor's Lump Sum Benefit?**

**Answer:** To claim a Survivor's Lump sum Benefit, your survivor and your employer must submit the following to the nearest NASSCORP Regional Office:

- Formal transmittal letter from the employer
- Group color photo of widow/widower and child/children
- Form C-1
- Certificate of Death
- Certificate of Marriage (Traditional or Civil); or letter of attestation from prelate.

#### **4.15 What happens to my Survivors if I did not pay 50 monthly contributions before my death?**

**Answer:** If you paid less than 50 monthly contributions but you paid at least 12 or more contributions, your survivors will receive what is called **Survivor Grant**. This is all of your 4% contributions plus interest thereon.

### **5.0 EMPLOYEES WORKING FOR TWO OR MORE EMPLOYERS AT THE SAME TIME**

#### **5.1 How many contributions should I make if I work for two or more employers at the same time?**

**ANSWER:** According to the Social Security law of Liberia, you must pay contributions on earnings you receive from every job that you have, no matter how many different employers you work for. Also, when you claim benefits, earnings from each job are taken into account to calculate your benefits.

#### **5.2 If I am no longer working for an employer and become self-employed, but I am not yet 60 years and I want to continue paying my contributions under the NPS, what should I do?**

**Answer:** If you find yourself in this situation, simply write a letter to the Director General of NASSCORP, asking him/her to allow you to continue paying your contributions toward the NPS. Since you are self-employed, your letter will need to describe exactly what job you are doing as a self-employed person, and it should describe how



much money you earn each month. If your request is approved, you will be allowed to pay into the NPS an amount of 7% of your gross monthly earnings from your last employer.

## **6.0 OTHER IMPORTANT INFORMATION ABOUT THE SCHEMES**

### **6.1 The following categories of persons/employees are NOT eligible for coverage under the schemes:**

- Persons born before September 1, 1959
- Persons under age 18 or above age 65
- Members of the Armed Forces of Liberia, including the Naval, Military and Air Force;
- Members of any of the Naval, Military and Air Forces of the Government of a country other than the Republic of Liberia;
- Members of the employer's family dwelling in his/her house or in the curtilage thereof;
- Wives working for their husbands, vice versa;
- Domestic servants; and
- Persons employed on board vessels, ships, boats, or canoes, etc., flying Liberian Flag.

### **6.2 Why are these persons not covered?**

**Answer:** The categories of persons mentioned above require special pension plans and life insurance policies appropriate to their needs and characteristics. Also, some of these individuals are extremely high risk employees and they perform their jobs under conditions that are difficult to monitor.

### **6.3 Is it true that some foreigners are not eligible for NASSCORP coverage?**

**Answer:** Yes, there are some foreigners who are excluded from NASSCORP benefits under the Social Security law of Liberia. Diplomats, foreign military personnel are among those who are ineligible for NASSCORP coverage.

#### **6.4 Can I choose not to be a member of the Schemes?**

**Answer:** No, you cannot choose to remove yourself from the NASSCORP Schemes. According to the Social Security law of Liberia, the National Social Security program is a compulsory Social Insurance Program instituted by the Government of Liberia, and you therefore do not have that choice. You must cooperate and remain in the program.

#### **6.5 What effect does the NPS have on any other special pension program I have with my employer?**

**Answer:** The NPS will not interfere with any pension rights that an employee may have with his/her employer. However, the special pension plan with your employer must not in any way interfere with or prevent an employer or employee from contributing to the NASSCORP Schemes.

#### **6.6 Is there any difference between the NPS and the Labor Law Pension?**

**Answer:** Yes, there is a difference between the NPS and the Labor Law Pension. The Labor Law Pension requires that you work for an employer for 25 or more years consecutively to qualify for pension. Under the NPS however, you need to work for your employer for a minimum of one hundred (100) months for persons born before 1980 and one hundred forty-four (144) months for persons born 1980 and after and you can change employers as many times as you like.

**NOTE:** In fact, the Government of Liberia requires all public sector employees, including civil servants, to subscribe to the Social Security conditions for Retirement Pension.

# 7.0 APPENDIX: SAMPLES OF VARIOUS FORMS



**NATIONAL SOCIAL SECURITY AND WELFARE CORPORATION**  
 www.nasscorp.org.lr 15<sup>th</sup> Street & Payne Avenue, Monrovia nasscorp@nasscorp.org.lr

Please  
Attach  
Photo

**FORM 2: EMPLOYEE REGISTRATION**

First Name	Middle Name	Last Name	Suffix
------------	-------------	-----------	--------

Date of Birth (MM/DD/YY)	County of Birth	Nationality	Sex	Marital Status
--------------------------	-----------------	-------------	-----	----------------

Home Address

Work Address

Previous Place(s) of Work	Period (Month & Year)
1	— — / — —
2	— — / — —
3	— — / — —

Do you have a SS ID CARD? Yes ( ) or NO ( ) If Yes, provide your Social Security Number below

--	--	--	--	--	--	--	--	--

DEPENDENTS		
Name	Date of Birth (MM/DD/YY)	Relationship

Use back for additional dependents

**Contact Information**

Cell:  
Home:  
Email:

**Please Affix Your Signature or Finger Print here**

Signed  
Date

I have affixed my signature/finger print above to confirm that the information given is true and correct.

**NASSCORP OFFICIAL USE ONLY:**  
 New Social Security Number

--	--	--	--	--	--	--	--	--

Entered By \_\_\_\_\_ QA \_\_\_\_\_ DMS scanned By \_\_\_\_\_



NATIONAL SOCIAL SECURITY & WELFARE CORPORATION  
 www.nasscorp.org.lr 15<sup>th</sup> Street & Payne Avenue, Monrovia nasscorp@nasscorp.org.lr  
 FORM 3: ROLL OF EMPLOYMENT **PART A**

--

EMPLOYER'S NAME

--	--	--	--	--	--	--	--

EMPLOYER'S CODE

I give below the names and other particulars of new employees as defined in Section 89.70 (4) recruited during the month \_\_\_\_\_. New employees who do NOT have the 9- digit Social Security Number should complete Form 2 -- (EMPLOYEE REGISTRATION).

NO. (1)	LAST NAME (2)	FIRST NAME (3)	SOCIAL SECURITY NO. (4)	Is Form Two (2) Attached?	
				YES	NO *NA

Date \_\_\_\_\_ Authorized Signature \_\_\_\_\_ Position in Firm \_\_\_\_\_ Date and Stamp of Employer \_\_\_\_\_

See **REVERSE SIDE** for **PART B** in respect of employees who have ceased employment. (Please Stamp all Pages) Page \_\_\_\_ of \_\_\_\_ Page(s)

\*NA - Not Applicable if applicant has the 9-digit Social Security Number.

**PART B**

I give below the names and other particulars of employees who CEASED TO BE EMPLOYED in this business during the month \_\_\_\_\_.

NO. (1)	LAST NAME (2)	FIRST NAME (3)	SOCIAL SECURITY NO. (4)

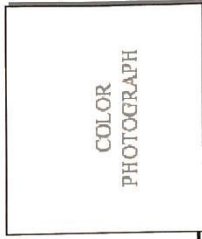
Date \_\_\_\_\_ Authorized Signature \_\_\_\_\_ Position in Firm \_\_\_\_\_ Stamp and Date \_\_\_\_\_



**NATIONAL SOCIAL SECURITY AND WELFARE CORPORATION (NASSCORP)**  
15<sup>th</sup> Street & Payne Avenue, Sinkor, Monrovia, Liberia

**SOCIAL SECURITY BENEFITS CLAIM FORM C1**

Claims Must Be Submitted Through Formal Transmittal Letters



COLOR  
PHOTOGRAPH

**SECTION 1: PARTICULARS OF EMPLOYER AND EMPLOYEE (To be filled in for all claims)**

Employer's/Entity's Full Name	Contact Information
Insured person's Full Name (Last Name, First Name Middle Name)	Occupation/Type of Job

SS Code	Date of Birth	From Year
m m d d y y	m m d d y y	m m d d y y

**SECTION 2: DEPENDENTS (widow, widower, children, parents, grandparents)**  
**Fill in for DEATH AND SURVIVOR benefits**

Names of Dependents	Age or Date of birth	Sex	Relationship	Previous Employer's Name	From Year	To Year	Currency of Earnings
							LD
							USD

**SECTION 3: EMPLOYMENT HISTORY SINCE SEPTEMBER 1, 1988**  
(Fill in only if the insured person is not or was not already receiving Social Security pension)

Names of Dependents	Age or Date of birth	Sex	Relationship	Previous Employer's Name	From Year	To Year	Currency of Earnings
							LD
							USD

**SECTION 4: REQUIREMENTS PER TYPE OF CLAIM (To be attached)**

<p><b>Temporary Disability Benefit (Accident, Industrial or Occupational)</b></p> <ol style="list-style-type: none"> <li>Formal Transmittal Letter from Employer</li> <li>NASSCORP Accident Report from Employer (Form B 26)</li> <li>Two passport size color photos</li> <li>Police Report in case of motor accident or Industrial Accident Report (B 26)</li> <li>Two Eyewitnesses' Statements in case of Industrial accident</li> <li>Medical Report/Bill</li> <li>Original Medical Expense Receipt(s) for Re-imbusement</li> </ol>	<p><b>Death Benefit or Survivor's Pension Benefit/Grant</b></p> <ol style="list-style-type: none"> <li>Formal Transmittal Letter From Employer/Claimant</li> <li>Certification of Marriage</li> <li>Certification of Death of the Deceased Insured Person</li> <li>One Group Color Photo of Dependents **</li> <li>Police Report in case of motor accidents</li> <li>Two Eyewitnesses' Statements in case of an industrial accident</li> </ol>
<p><b>Retirement Pension/Grant &amp; Invalidity Pension/Grant</b></p> <ol style="list-style-type: none"> <li>Formal Transmittal Letter from Employer/Claimant</li> <li>Two Passport Size Color Photos</li> </ol>	

\*\* Dependents include widow, widower, parents, grandparents, children under age 18 years and up to age 21 years for children in school full time

**NATIONAL SOCIAL SECURITY & WELFARE CORPORATION (NASSCORP)**  
**15<sup>th</sup> Street & Payne Avenue, Sinkor, Monrovia, Liberia**

**SECTION 5: EARNING HISTORY OF CLAIMANT [Monthly earnings over last ten years or for the tenure of employment if length of employment with current Employer is less than ten years]. Monthly earnings for the last twelve (12) months in case of Employment Injury. [Fill in by Employer]**

PERIOD	YEAR												
MONTH				YEAR	YEAR	YEAR	YEAR	YEAR					
January													
February													
March													
April													
May													
June									YEAR	YEAR	YEAR	YEAR	YEAR
July													
August													
September													
October													
November													
December													
Total													

I declare that I, or the aforementioned insured person, was (retired, injured, invalidated, deceased) on the date

Name \_\_\_\_\_ Signature \_\_\_\_\_ Contact # \_\_\_\_\_

**ENDORSEMENT BY EMPLOYER’S AUTHORIZED REPRESENTATIVE**

Name \_\_\_\_\_ Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**COMPANY STAMP**