

## The National Insurance Board Of The Commonwealth of The Bahamas The National Insurance Act, 1972

For Officia	l Use Only		

## **CLAIM FOR MATERNITY GRANT (SPOUSE) (Form Med.3B)**

**Note**: This claim form MUST be accompanied by the following documents:

- ✓ Marriage Certificate;
- ✓ Child's Birth Certificate;
- ✓ Completed Form Med.2;
- ✓ Affidavit, in case of common-law union.

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Section	<b>A</b> :	Spouse	S	v	etan	lS

1Last Name		First Name	Middl	le Name(s)
2. N.I.#:	3. Date of Birth:			
5. Telephone #1:		6. Telephone #2:		
7. P.O. Box:	8. Date of	f Marriage:		
9. Employment History:		<i>C</i>	dd/mm/yyyy	
Previous Employer/Company	y Name	Start Date (da	!/mm/yyyy)	End Date (dd/mm/yyyy)
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Section B: Spouse's Declara	<u>tion</u>			
declare that:				
0. I hereby claim Maternity Grant of	n behalf of the cla	aimant.		
1. The information given by me on	this form is true a	and correct to the l	est of my kno	owledge and belief.
12. Signature:			Date	:
				dd/mm/yyyy

## **Section C: Claimant's Details** Middle Name(s) 16. House # & Street: 17. Telephone #1: \_\_\_\_\_ 18. Telephone #2: \_\_\_\_ 19. P.O. Box: \_\_\_\_\_\_ 20. Date of Confinement: \_\_\_\_\_ dd/mm/yyyy 21. Number of Live Births: \_\_\_\_\_ **Section D: Claimant's Declaration** I declare that: 22. I hereby claim Maternity Grant using the contributions of my Spouse. 23. The information given by me on this form is true and correct to the best of my knowledge and belief. Date: \_\_\_\_\_ 24. Signature: dd/mm/yyyy Note: For further information about the Maternity Benefit, please ask for the Maternity Benefit & Grant leaflet at your nearest Local Office or visit www.nib-bahamas.com. IMPORTANT NOTE: Any person who for the purpose of obtaining benefit under The National Insurance Act, for himself or for some other person, knowingly makes any false statement or false representations or produces any document, etc. which he knows to be false, shall be liable to a fine not exceeding Two Thousand Five Hundred Dollars (\$2,500), or to imprisonment for a period not exceeding twelve (12) months or both. For Official Use Only