

**SOCIAL SECURITY BOARD
CHAPTER 44 LAWS OF BELIZE**

REQUEST FOR STATISTICAL INFORMATION

The Manager
RESEARCH, DEVELOPMENT AND CONTRIBUTIONS DEPT.
P.O. Box 18
Belmopan

FROM: _____

INSTITUTION/ORGANIZATION: _____

Please provide me with the following statistical information:

DATA	PERIOD (Date available from 1981 to 2000)
<input type="checkbox"/> Registered Employers by Industry	<input type="text"/>
<input type="checkbox"/> Registered Employees by Industry	<input type="text"/>
<input type="checkbox"/> Registered Persons by District	<input type="text"/>
<input type="checkbox"/> Employers Registered by District	<input type="text"/>
<input type="checkbox"/> Employees Registered by Marital Status	<input type="text"/>
<input type="checkbox"/> Registered Persons by Age or Sex	<input type="text"/>
<input type="checkbox"/> Benefit Claims by Type and Number	<input type="text"/>
<input type="checkbox"/> Benefit Payments by Branch and Year	<input type="text"/>

Other statistics available:

Injury Benefit claims allowed and paid
showing number of days paid and number
of claimants by Sex for period January to December

Sickness Benefit claims allowed and paid
showing number of days and number
of claimants by Sex for period January to December