EMPLOYER'S CONTRIBUTION AND WAGE REPORT - ADVANCE REIMBURSEMENT

JOB SERVICE NORTH DAKOTA
UNEMPLOYMENT INSURANCE
SFN 52307 (R. 5-08)

UI/Tax & Field Services
PO BOX 5507
Bismarck ND 58506-5507
701-328-2814 OR 800-472-2952
TTY: Relay ND 800-366-6888 FAX: 701-328-1882

Employer Name		
Employer Address 1		
Employer Address 2		
City	State	ZIP

☐ CHECK HERE IF ADDRESS HAS CHANGED - CHANGE ADDRESS ABOVE

Account Number	Quarter Ending	Due Date	Tax Rate %

Taxable wages are the total wages paid each employee in the calendar year. If no wages were paid write none in Item 1, sign and return.

1. Total Wages Paid This Quarter	
2. Contribution Due x Line 1	
3. Adjustments for Prior Balance	
4. Penalty	
5. Interest	
6. Total Amount Payable to **Job Service North Dakota**	

7. Indicate If:

A. ☐ Business has been sold	Date Sold	New Owner's Name	
B. ☐ Business has been discontinued	Date Discontinued	Address	
C. ☐ FEIN has changed	New FEIN	City	State / ZIP

8. Employee's Social Security Number	9. Name of Employee	10. Gross Wages Paid this Quarter	11. Number of Employees Listed (all pages)
			12. For each month, report the number of covered workers who worked during or received pay for the payroll period which includes the 12th of the month.
			1st Month
			2nd Month
			3rd Month
			13. TOTAL WAGES
(USE ADDITIONAL SHEETS IF NECESSARY)			← THIS PAGE

14. Name of Person Completing Report	Telephone Number

I certify that this report is correct and no part of the contribution was or will be paid by any employee.

Signature	Title	Telephone Number	Date

Job Service North Dakota is an equal opportunity employer/program provider.
Auxiliary aids and services are available on request to individuals with disabilities.