

## West Virginia Unemployment Compensation CONTRIBUTION REPORT

See more instructions on separate sheet. **MUST BE TYPEWRITTEN OR PRINTED IN BLACK INK IN ALL CAPITAL LETTERS. DO NOT PRINT COMMAS, DECIMALS OR \$ SIGNS.**

1) EMPLOYER NAME & ADDRESS

2) EMPLOYER NUMBER

3) FOR CALENDAR QTR

4) FEDERAL ID NUMBER

5) DUE DATE

If your Federal ID No. shown is incorrect enter correct number here:

6) Total wages paid this quarter including cents - (See instructions) **Do not make adjustments for prior quarters.**

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16) Number of employees in the pay period including the 12th of the month

7) Excess wages paid during quarter to each employee. (See instructions)

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1st Month =

8) Taxable wages: Subtract Line 7 from Line 6 -

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2nd Month =

9) Your tax rate for this quarter =

3rd Month =

10) Contributions for this quarter = Multiply Line 8 by Line 9

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Total number of employees on your wage report

11) Penalty due if this report is filed and paid after Due Date = 0.10 x Line 10 but not less than \$50 or more than \$500

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17) Signature date

12) Interest due if this report is filed after Due Date = Multiply Line 10 + Line 11 x No. of days late x 0.00033

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18) Title of individual signing

13) Less credit from previous overpayment. Attach copy of credit memorandum, Form WVUC A94-B

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19) Preparer's telephone number

14) Enter the Exact Amount of Payment Submitted with this Report. **Make Checks Payable To: Unemployment Compensation Division**

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20) Signature below certifies that the information contained herein is true and correct to the best of the signer's knowledge.

15) Prior balance due on your account as of: (See Instructions)

**PHOTOCOPY BOTH THE CONTRIBUTION AND WAGE REPORTS FOR YOUR RECORDS, MAIL THE ORIGINALS (NO PHOTOCOPIES) AND YOUR CHECK TO:**

UNEMPLOYMENT COMPENSATION DIVISION  
WORKFORCE West Virginia  
CONTRIBUTION ACCOUNTING  
PO BOX 106  
CHARLESTON, WV 25321-0106



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