

CONTINUATION SHEET FOR REPORT OF EMPLOYEES WAGES

RETURN THIS PAGE IF NEEDED TO COMPLETE REPORT

TYPE INFO AS SHOWN ON FORM NCU1 101

(1) EMPLOYER LEGAL NAME

(5) QTR-YR

(7) EMPLOYER ID NUMBER

*(14)SSN	*(15)LAST NAME	*(16)FIRST NAME	(17)MI	*(18)GROSS WAGES	(19)OUT OF STATE TAXABLE WAGES	(20)OUT OF STATE CODE	(21)HOURS WORKED	(22)EMPLOYEE/OFFICER	(23)SEASONAL	(24)LOCATION SUMMARY	(25)SOC CODE
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TOTALS											