

**NORTH CAROLINA DEPARTMENT OF COMMERCE
DIVISION OF EMPLOYMENT SECURITY**

**Unemployment Insurance
Tax**

**P.O. Box 26504
Raleigh, NC 27611**

Quarterly Tax Payment Voucher

If you have filed Employer's Quarterly Tax and Wage Report electronically, and you wish to mail in your payment, this form **must** accompany your check or money order. Please fill in the information below, sign your name, and mail to the address shown.

Transaction code **03**

1. Employer Name: _____

2. Account Number:

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3. Quarter/Year:

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4. Tax Due: \$ _____

5. Interest Due: \$ _____

6. Penalty -- Late Filing: \$ _____

7. Penalty -- Late Payment: \$ _____

8. Total Remittance Due: \$ _____

PAPER CLIP CHECK HERE

REMOVE CHECK STUB

9. Prepared by: _____ Date: _____