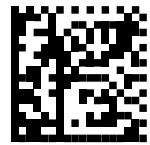




**North Carolina Department of Commerce  
Division of Employment Security  
Unemployment Insurance**



999999

**Monthly Billing Statement 2nd Level**

JACK T HOOVER  
700 Main Street  
Raleigh, NC 27000

Mail Date: February 24, 2017  
Claimant ID: 1234567

Current Total Debt Balance: \$823.27  
Minimum Monthly Payment: \$382.99

**This account is 30 days past due. You failed to make the required Minimum Monthly Payment. If you pay the Minimum Monthly Payment above by September 1, 2018, next month your Minimum Monthly Payment will return to \$0.00**

**This is not a payment agreement.** If you are not in an approved/current payment agreement, paying the minimum monthly payment will not stop further collection efforts. The Agency may collect through Federal Tax Refunds, State Tax Refunds, Lottery Winnings or Wage Garnishment. If you would like to enter a payment agreement, please contact a Recovery Specialist by phone at 919.707.1338.

If you can make payments, request a payment agreement online by visiting [des.nc.gov](http://des.nc.gov) and logging into your claimant homepage. You may also send a check or money order payable to **North Carolina Division of Employment Security**. Please include the last four digits of your Social Security number on your payment.

Return the bottom portion of this form with your payment. Keep the top portion for your records.

-----  
Please mail this coupon with your payment, payable to **North Carolina Division of Employment Security**. If your address has changed, please provide the new address below:

Address: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Zip Code: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_

Notice Date:	February 24, 2017	JACK T HOOVER Mr
Amount Due:	\$382.99	Claimant ID#: 1234567
Due on:	September 1, 2018	

Mail to: NC Division of Employment Security  
Benefit Payment Control Unit  
Post Office Box 25903  
Raleigh, NC 27611-5903

Help us prevent UI Fraud by responding timely and accurately to requests for information

