

EMPLOYER QUARTERLY CONTRIBUTION AND WAGE REPORTS

ORIGINAL

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FORM ALIGNMENT BOXES

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FORM ALIGNMENT BOXES

1. EMPLOYER NAME
ABC Corporation, Inc.

2. ACCOUNT NUMBER
01 1111 22
4. TOTAL NO. PAGES Including Continuation Sheets
2

3. QUARTER ENDING DATE
03/31/00
5. TOTAL NO. OF EMPLOYEES
1

6. EMPLOYEE'S SOCIAL SECURITY NUMBER 000 00 0000	7. NAME: FIRST MIDDLE INITIAL LAST	8. TOTAL WAGES
11. EXCESS WAGES PAID THIS QUARTER (Enter on Line 2b, Form UCE-101) <small>(See example for computing excess wages)</small>	9. TOTAL WAGES THIS PAGE 10. TOTAL WAGES THIS REPORT (Enter on Line 2a, Form UCE-101)	
	1,500.00	8,500.00

FORM UCE-101

NAME, ADDRESS ABC Corporation, Inc. 1020 Crews Road Suite L Charlotte, NC 28105					SCESC ACCT. NO.		QUARTER ENDING DATE		CURRENT F.E.I.N.				
					01 1111 22		03/31/00		56-1234567				
					2 A. TOTAL WAGES PAID THIS QUARTER							8,500.00	
					B. LESS: EXCESS OVER \$7000 (SEE ITEM 2B ON INSTRUCTIONS)							1,500.00	
					C. NET TAXABLE WAGES (ITEM 2A MINUS 2B)							7,000.00	
L.B.	L.E.	L.A.	CH.	AREA									
						3 A. TOTAL CONTRIBUTIONS DUE ITEM 2C TIMES- 0.0048 33.60							
1. Number of covered workers who worked during or received pay for the payroll period which includes the 12th of the month.			1	1	1	B. CONTINGENCY ASSESSMENT DUE ITEM 2C TIMES 0.0006 4.20							
			MONTH 1	MONTH 2	MONTH 3								
						4 INTEREST DUE							
						5 PENALTY DUE							
SIGNATURE						DATE							
PREPARER'S TELEPHONE NUMBER () -						6 LESS OUTSTANDING CREDIT OF \$							
EMPLOYER'S CERTIFICATION: I CERTIFY THAT THE INFORMATION CONTAINED IN THIS REPORT AND ANY SUBSEQUENT PAGES ATTACHED IS TRUE AND CORRECT AND NO PART OF THE TAX WAS OR IS TO BE DEDUCTED FROM THE EMPLOYEE'S WAGES.						7 TOTAL AMOUNT DUE THIS QUARTER MAKE REMITTANCE PAYABLE TO: SCESC 37.80							