

Utah Department of Workforce Services, Unemployment Insurance

Unemployment Insurance

140 E. 300 S., PO Box 45288, Salt Lake City UT 84145-0288

1-801-526-9235 option 4 1-800-222-2857 option 4

The preferred method of filing this report is on-line at our website:



<http://jobs.utah.gov/ui>



EMPLOYER NAME & ADDRESS:

Registration #:

Quarter:

Year:

As Reported on
EMPLOYER'S
CONTRIBUTION REPORT
(Form 3)

CORRECT AMOUNT

DIFFERENCE

Total Wages:			
Excess Wages:			
Subject Wages:			
Contribution Due:			

PAYMENT SUMMARY

Previous Payment This Quarter:

\$

Additional Contribution Due:

\$

Interest Due:

\$

Additional Contribution Paid:

\$

Refund Due:

\$

INSTRUCTIONS

1. Use a separate form for each quarter amended.
2. Total payroll reported on your Form 3 should show on this form.
3. Corrections must be made in the quarter the wages were actually paid; i.e. 1st quarter amendments cannot be made in the 2nd quarter.

Explanation for Amendment:

Printed Name: _____ Telephone: (____) _____

Signature: _____ Title: _____ Date: _____