



ARIZONA DEPARTMENT OF ECONOMIC SECURITY
 PO BOX 52027
 PHOENIX, AZ 85072-2027

ARIZONA ACCOUNT NUMBER 1425970 6
 CALENDAR QUARTER ENDING 3/31/2003
 TO AVOID PENALTY MAIL BY 4/30/2003
 FEDERAL ID NO. 99-9999999

Business Name and Address
XYZ ADMINISTRATORS

USE BLACK INK ONLY

100 N WONDERFUL WAY
 PHOENIX, AZ 85040

Telephone (602) 248-9354

UNEMPLOYMENT TAX AND WAGE REPORT

A. NUMBER OF EMPLOYEES -- Report for each month, the number of full and part-time covered workers who worked during or received pay subject to UI Taxes for the payroll period which includes the 12th of the month.

JANUARY	10
FEBRUARY	10
MARCH	10

B. WAGES -- List all employees in Social Security Number order, or alphabetically by last name. Please use white paper in the same format for additional employees. If you have ten or more employees, consider reporting via magnetic media. Ask for "Arizona Magnetic Media Reporting" (PAU-430). We support diskette and cartridge media.

C. WAGE SUMMARY -- Computation of payment due.
 (See instructions for assistance)

1. TOTAL WAGES PAID IN QUARTER	66543.33
From Section B. Wage Listing	
2. SUBTRACT EXCESS WAGES	17500.00
Cannot exceed Line 1 -- see instructions	
3. TAXABLE WAGES PAID	49043.33
Up to \$7000 per Employee -- Line 1 minus line 2	
4. TAX DUE	235.41
Line 3 X Tax Rate of 0.48%	
The decimal equivalent = .0048	
5. ADD INTEREST DUE	
1% of Tax Due for each month payment is late	
6. ADD PENALTY FOR LATE REPORT	
0.10% of Line 1 (\$35 min / \$200 max)	
7. ADD JOB TRAINING TAX DUE	49.04
0.10% of Line 3 (Effective January 1, 2001)	
8. TOTAL PAYMENT DUE	284.45
Effective 4th quarter of 2004: If the sum of lines 4 & 7 is equal to or less than \$9.99, payment of the taxes due is not required.	
9. AMOUNT PAID	284.45
Make check payable to DES-Unemployment Tax	

LIEN MAY BE FILED WITHOUT FURTHER NOTICE ON DELINQUENT TAXES.

PLEASE RETURN ORIGINAL

1. Employee Social Security Number	2. Employee Name (Last, First)	3. Total Wages Paid In Quarter
SEE ATTACHED LISTING		
TOTAL WAGES PAID THIS PAGE		
TOTAL WAGES PAID ALL PAGES		66543.33
Signature:		Prepared By:
Title:		
Date:		Telephone:

PHOTO COPY FOR YOUR RECORDS

