

DO NOT STAPLE THIS FORM

EMPLOYER'S QUARTERLY CONTRIBUTION AND WAGE REPORT

State of Nevada
Department of Employment, Training & Rehabilitation
EMPLOYMENT SECURITY DIVISION
500 E. Third St., Carson City, NV 89713-0030
Telephone (775) 687-4540

PLEASE CORRECT ANY NAME/ADDRESS INFORMATION BELOW. 1a. EMPLOYER ACCOUNT NUMBER 1/01/06 137473.00-0 CREATIVE DESIGN, INC. CREATIVE MARKETING CO. 1001 EXECUTIVE CENTER SUITE 301 RENO, NV 89502		1b. FOR QUARTER ENDING 2006/1 MAR 31, 2006 1c. DELINQUENT AFTER APR 30, 2006 1d. YOUR RATES UI RATE = 2.90% CEP RATE = 0.05%	1e. FEDERAL I.D. NO. 93-4243160 IMPORTANT FOR YOUR PROTECTION, VERIFY YOUR FEDERAL I.D. NO. ABOVE. IF IT IS IN ERROR, PLEASE ENTER THE CORRECT NUMBER HERE A REPORT MUST BE FILED						
3. TOTAL GROSS WAGES (INCLUDING TIPS) PAID THIS QUARTER (If you paid no wages, write "NONE," sign report and return.) (See Instructions)		Dollars 4712 Cents 88	SEE INSTRUCTIONS						
4. LESS WAGES IN EXCESS OF \$24,000.00 PER INDIVIDUAL (Cannot exceed amount in Item 3.) (See Instructions)			2. REPORT OF CHANGES If any of the following changes have occurred, please check the appropriate box and provide details on page 2. <input type="checkbox"/> Business Discontinued <input type="checkbox"/> Ownership Change <input type="checkbox"/> Entire Business Sold <input type="checkbox"/> Part of Business Sold <input type="checkbox"/> Legal Ownership Change <input type="checkbox"/> Business Added (FOR DIVISION USE ONLY)						
5. TAXABLE WAGES PAID THIS QUARTER (Item 3 less Item 4.)		Dollars 4712 Cents 88							
6. UI AMOUNT DUE THIS QUARTER (Item 5 x your UI Rate shown in Item 1d.)		Dollars 136 Cents 67							
7. CEP AMOUNT DUE THIS QUARTER (Item 5 x the CEP Rate in Item 1d.) (Add) (Do not include the CEP amount on federal unemployment tax return Form 940.)		Dollars 2 Cents 36							
8. PRIOR CREDIT (Attach "Statement of Employer Account") (Subtract)									
9. CHARGE FOR LATE FILING OF THIS REPORT (One or more days late add \$5.00 forfeit.) (Add)									
10. ADDITIONAL CHARGE FOR LATE FILING, AFTER 10 DAYS (Item 5 x 1/10% (.001) for each month or part of month delinquent.) (Add)									
11. INTEREST ON PAST DUE UI CONTRIBUTIONS (Add) (Item 6 x 1% (.01) for each month or part of month delinquent.) (See Instructions)									
12. TOTAL PAYMENT DUE (Total Items 6 through 11.) MAKE PAYABLE TO NEVADA EMPLOYMENT SECURITY DIVISION. Please enter Employer Account Number on check.		Dollars 139 Cents 03							
13. SOCIAL SECURITY NUMBER	14. EMPLOYEE NAME <small>Do not make adjustments to prior quarters.</small>	15. TOTAL TIPS REPORTED Dollars Cents		16. TOTAL GROSS WAGES INCLUDING TIPS Dollars Cents					
	** SEE ATTACHED WAGE LISTINGS **								
17. NUMBER OF WORKERS LISTED ON THIS REPORT <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto; text-align: center;">4</div>									
18. FOR EACH MONTH, REPORT THE NUMBER OF WORKERS WHO WORKED DURING OR RECEIVED PAY FOR THE PAYROLL PERIOD WHICH INCLUDES THE 12TH OF THE MONTH. <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 33%;">1 MO</td> <td style="width: 33%;">2 MO</td> <td style="width: 33%;">3 MO</td> </tr> <tr> <td>0</td> <td>0</td> <td>0</td> </tr> </table>		1 MO	2 MO	3 MO	0	0	0		
1 MO	2 MO	3 MO							
0	0	0							
19. TOTAL PAGES THIS REPORT 		20. TOTAL TIPS AND TOTAL WAGES THIS PAGE \$							
21. I certify that the information contained on this report and the attachments is true and correct.									
_____ Signed/Title		_____ Name of Preparer if Other Than Employer (775) 358-1121							
_____ Area Code Fax Number		_____ Area Code Telephone Number							
		_____ Date 4/30/2006							

STATE OF NEVADA
 DEPARTMENT OF EMPLOYMENT, TRAINING AND REHABILITATION
 EMPLOYMENT SECURITY DIVISION
 500 E. Third Street
 Carson City, Nevada 89713-0030

**CONTINUATION SHEET
 EMPLOYER'S QUARTERLY LIST OF WAGES PAID**

EMPLOYER ACCOUNT NUMBER 137473.00-0	FOR QUARTER ENDING 3/31/2006	PAGE NUMBER 1
NAME CREATIVE DESIGN, INC. CREATIVE MARKETING CO.	ENCLOSE THIS FORM WITH THE "EMPLOYER'S QUARTERLY CONTRIBUTION AND WAGE REPORT" (FORM NUCS-4072)	
ADDRESS 1001 EXECUTIVE CENTER SUITE 301 RENO, NV 89502		

SOCIAL SECURITY NO.	EMPLOYEE'S NAME	TOTAL TIPS REPORTED THIS QUARTER	TOTAL WAGES (INCLUDING REPORTED TIPS) THIS QUARTER
135 42 1763	ANDERSON, WILLIAM		1460.00
147 36 1276	DOUGHERTY, ROGER		1362.50
134 56 2324	HANCOCK, JANET		1272.00
147 77 3322	PATTERSON, MARY		618.38
TOTAL TIPS AND TOTAL WAGES THIS PAGE		\$	\$ 4712.88

Report Not Complete if Social Security Numbers Are Missing