

REMIT TO:
Alaska Department of Labor
And Workforce Development
Division of Employment and Training Services
P.O. BOX 115506
JUNEAU, AK 99811-5506

Statement of Account

Employer Name and Address:

Attach check as shown below

Pay to the order of:	<u>DOLWD Employment Security Tax</u>	Date	_____	###
			\$	<input type="text"/>
				_____ /100 DOLLARS
Memo:	<u>Account number</u>	AUTHORIZED SIGNATURE		

Quarter Ending Date	Account Number	Total	Received Date Agency use only