

REMIT TO:
Alaska Department of Labor
And Workforce Development
Division of Employment and Training Services
P.O. BOX 115509
JUNEAU, AK 99811-5509

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