

Department of the Treasury - Internal Revenue Service
**Request for Verification of
Credit Information Shown on Form 940**

Name and address of employer

Date

Calendar year

Employer identification number

The Form 940 filed with the IRS by the employer named above indicates the following information for the calendar year shown.

State in Which Employees Performed Services (1)	State Reporting No. as Shown on Employer's State Contribution Returns (2)	Taxable Payroll (as defined in State Act) (3)	Experience Rate Period (4)		Experience Rate (5)	Contributions Actually Paid to State (6)
			From-	To-		

State Agency: Please complete the certification below and fax or mail it back to us. Show any differences between the information shown above and your records in the space below. Also show any contributions paid after February 1.

Fax Number: _____ Attention: _____ (FUTA Liaison)	OR	Mail to: Director, Internal Revenue Service Center	Other (remarks, etc): _____
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State Reporting No. as Shown on Employer's State Contribution Returns	Experience Rate Period		State Taxable Wages	Experience Rate	Contributions Paid Before February 1	Contributions Paid February 1 through February 10	Contributions Paid After February 10
	From-	To-					

I certify that, except as shown above, the records of this office agree with the entries shown in columns (2), (3), (4), (5), and (6), and that all contributions were paid before February 1.

Name of State

Name of State Officer

Date

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