



# AMENDED

# CONTINUATION WAGE LISTING

LOUISIANA WORKFORCE COMMISSION  
 OFFICE OF UNEMPLOYMENT INSURANCE ADMINISTRATION  
 P.O. BOX 94100  
 BATON ROUGE, LOUISIANA 70804-9186  
 ATTN: TAX ACCOUNTING/ADJUSTMENTS  
 (225) 342 -2961 FAX (225) 342-5833

*This document is semi-interactive. It may be filled out on-line but must be mailed or faxed in.*

<b>Employer Name &amp; Address</b>	<b>State ID. Number</b>	<b>Year/Quarter</b>
<b>This form is a continuation of Lines 12 thru 15 of the          Quarterly Wage &amp; Tax Report - Amendment Form.</b>		

	<b>12. Soc. Sec. Number</b>	<b>13. Employee Name</b>	<b>14. Original Total Wages</b>	<b>15. Amended Total Wages</b>
1				
2				
3				
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