FORM 3, REV 7-1-71

UTAH DEPARTMENT OF EMPLOYMENT SECURITY

1234 SOUTH MAIN STREET, P O BOX 11800, SALT LAKE CITY, UTAH 84111

EMPLOYER'S QUARTERLY CONTRIBUTION REPORT

1ST	QUARTE	R 1972	DELINQUENT AFTER	APRIL	30, 1	972
1. EMPLOYER'S UTAH REGISTRATION NUMBER, NAME AND ADDRESS: (IF INCORRECT MAKE NECESSARY CHANGES. INCLUDE ZIP CODE.)						AUDITED
10 01 70 25 7391 67297 H TRACY HALL P 0 80X 533 UNIVERSITY STA PROVO UTAH 84601 CONTRIBUTION RATE 2.7%						CONTR
		COMPUTATION OF PAYMENT				NO.
2. ENTER NUMBER OF COVERED WORKERS IN UTAH WHO WORKED DURING OR RECEIVED PAY FOR ANY PART OF THE PAY PERIOD WHICH INCLUDED THE 12TH OF EACH MONTH. SEE INSTRUCTION C. 3. ENTER NUMBER OF NEW HIRES MADE IN UTAH. DURING THE QUARTER. SEE INSTRUCTION D. QUARTERLY TOTAL		 TOTAL WAGES PAID THIS QUARTER FOR COVERED EMPLOYMENT, TO NEAREST DOLLAR LESS WAGES IN EXCESS OF \$4200. PAID EACH WORKER. SEE INSTRUCTION F. NET TAXABLE WAGES PAID THIS QUARTER. CONTRIBUTION DUE THIS QUARTER, MULTIPLY ITEM 6 BY RATE ABOVE. 		s Nove		11. ARE THERE INCLUDED IN ITEM 4 BONUSES OR LUMP-SUMS PAID FOR A PERIOD OF SERVICE OF MORE THAN 3 MONTHS? YES NO IF YES LIST AMOUNT OF PAYMENT - SEE INSTRUCTION BEFORE COMPLETING. \$ PERIOD OF SERVICE FOR WHICH BONUS OR LUMP SUM PAYMENT WAS PAID. FROM: TO:
		. INTEREST IF COI 1% PER MON . PENALTY IF DELII \$2.50 SEE INS . TOTAL PAYMENT	\$			
DO			TAH UNEMPLOYMENT COMPE R CORRECTION OF PRIOR QUA		CTION J.	10:
12. EMPLOYEE'S SS NO.		13. NAME OF EMPLOYEE		14. TOTAL WAGES PAID		FOR AGENCY USE ONLY
16. TOTAL WAGES ALL PAGES. MUST AGREE WITH ITEM 4.			15. TOTAL WAGES THIS PAGE			
A REPORT MUST BE F	FILED. IF YOU	J PAID NO WAG	GES, WRITE "NONE" IN	ITEM 4, SIGN A	ND RET	URN.
CERTIFY THE INFORMATION CONTAI		T AND ATTACHMENT	S IS TRUE & CORRECT.			

TITLE

DATE 28 Warch 1972

EMPLOYER - KEEP THIS COPY