

MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS DIVISION OF EMPLOYMENT SECURITY

TRANSMITTAL OF QUARTERLY WAGES REPORTED ON MAGNETIC MEDIA

This form can be found online at <u>labor.mo.gov/media/pdf/4260-ai</u>.

Alternatively, you may submit the quarterly report and wage data online at <u>uinteract.labor.mo.gov</u>. When selecting a method to report the wage detail, select option 'Method B' to upload the wages from one of the accepted file formats.

RETURN THIS FORM WITH MAGNETIC MEDIA AND QUARTERLY CONTRIBUTION REPORT WITH REMITTANCE TO:

Division of Employment Security
Attention: Employer Accounts Unit/Magnetic Media
P.O. Box 59, 421 E. Dunklin Street
Jefferson City, MO 65104-0059
573-751-1995, option 2

THE EXTERNAL LABEL ON MEDIA MUST INCLUDE:

Account Number(s)
Employer Name(s)
Quarter/Year
Record Length
File Name

**NOTE: It is not necessary to send the Contribution Report to the P.O. Box 59 address and the magnetic media to the P.O. Box 888 address.

1. Employer Name					2. Quarto	er	3. Year
4. CD-RW Format	Record Length (accepted on Internet) 72 275 (ICESA format only) 512 Excel						Employers Reported Employees Reported
		Employer Sum	ım	ary Inforn	nation		
7. Missouri Employer A	ccount Number	8. Number of Employees Reported		9. Missouri Er	mployer A	Account Number	10. Number of Employees Reported
Contact name (Please print)						Date	
Title						Phone Number	

IMPORTANT: If needed, call 573-751-1995 for assistance in the translation and understanding of the information in this document.
¡IMPORTANTE!: Si es necesario, llame al 573-751-1995 para asistencia en la traducción y entendimiento de la información en este documento.

Missouri Division of Employment Security is an equal opportunity employer/program. Auxiliary aids and services
are available upon request to individuals with disabilities. TDD/TTY: 800-735-2966 Relay Missouri: 711