



MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS
DIVISION OF EMPLOYMENT SECURITY

**EMPLOYER'S ELECTION TO COVER MULTI-STATE WORKERS
UNDER THE MISSOURI EMPLOYMENT SECURITY LAW**

Employer's Name	Missouri Account No.	
Address (<i>Street, City, State, ZIP Code</i>)		
<p>The above employer hereby elects, subject to approvals by the employment security agencies involved, to cover certain individuals, customarily employed by the employer in more than one jurisdiction – named below, under the Employment Security Law of Missouri and requests the Division of Employment Security of Missouri to enter into a reciprocal coverage arrangement to that effect with the “interested jurisdictions”.</p>		
1. List all the states in which the individuals named under Item 2 may do some work for the employer.		
(a) _____	(d) _____	(g) _____
(b) _____	(e) _____	(h) _____
(c) _____	(f) _____	(i) _____
2. List of workers covered by this election who work in more than one of the above states.		
Name	Soc. Sec. Account No.	Residence Address
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
<i>(If more space is required, attach additional sheet)</i>		
3. Nature of employer's business		
4. The employer has a place of business in the following states listed above:		
5. Nature of work to be performed by the individuals listed under Item 2:		
6. Employer's reason for requesting coverage in Missouri		
7. The employer requests that this election become effective as of the beginning of a calendar quarter, namely as of _____ 1, 20____.		

(over)

EMPLOYER'S ELECTION TO COVER MULTI-STATE WORKERS (Continued)

- 8. This election, if approved, shall remain operative, as to the individuals listed herewith, until terminated in accordance with the currently applicable regulation of the Division of Employment Security of Missouri.
- 9. The employer hereby agrees to give each individual covered by this election a notice thereof, promptly after its approval, on form RC-2 to be supplied by the Division of Employment Security of Missouri, and to file copies thereof with said agency.
- 10. The employer hereby agrees to comply with any requirements applicable to this election under the Missouri Law.
- 11. To prevent this election from denying unemployment insurance coverage to workers not listed thereon, the employer hereby agrees with each interested jurisdiction approving this election that the state may count the workers covered by this election, and their wages, as if this election did not apply, for the purpose of determining whether the employer is covered by the law of such jurisdiction and whether any other workers employed by the employer are covered by said law.

_____ (Firm Name)

By _____

Date _____

_____ (Title)

APPROVAL BY DIVISION OF EMPLOYMENT SECURITY OF MISSOURI

The foregoing election is hereby approved, in accordance with the applicable regulation, as submitted by the electing employer.

DIVISION OF EMPLOYMENT SECURITY OF MISSOURI

Date _____

By _____
Chief of Employer Contributions Section

APPROVAL BY THE INTERESTED JURISDICTION OF _____

The foregoing election is similarly approved.

Name of Agency _____

By _____

Date _____

Title _____