

**VIRGINIA EMPLOYMENT COMMISSION**

**P.O. Box 2249  
Richmond, Virginia 23218-2249**

**NOTIFICATION OF CLAIM(S) FILED FOR BENEFITS**

**EMPLOYER NAME and Address:**

The employees of your company whose names appear on this form have filed for Partial Unemployment Benefits and are entitled to the Weekly Benefit Amount as shown, provided they meet the eligibility criteria for partial claimants. A Partial Claimant is an individual, who during a particular week, (1) had earnings, but less than his weekly benefit amount, and (2) was employed by a regular employer, and (3) worked less than his normal and customary hours for such employer. Please read the back of this letter for additional information concerning your responsibility for providing affected workers with Statements of Partial Unemployment.

**CLAIMANT INFORMATION:**

SSN                      Name                      Claim Effective Date                      Weekly Benefit Amount                      Benefit Year Ending

SAMPLE ONLY

If the claim was backdated (see Claim Effective Date) to include calendar weeks already ended: Within seven(7) days of this notice you are required to prepare a *Statement of Partial Unemployment, Form VEC-B-31*, (accessed, with instructions included, from the Virginia Employment Commission website <http://www.vec.virginia.gov>, Forms/Publications/Employer) for each employee listed *whose earnings were less than his weekly benefit amount during any calendar week ending since the effective date of the claim*. If the gross pay of the employee was reduced for any reason other than lack of work (vacation, holiday, sickness, injury, refusal of available work, failure to report, etc.), enter this information by the date of the occurrence.

Subsequent statements, accessed as shown above, are to be provided to each affected worker no later than 14 days of pay period ending dates. The statements are to reflect gross earnings in calendar weeks and may or may not coincide with your pay periods.

Partial claimants are instructed to submit the statement within 14 days to Virginia Employment Commission, and further, that failure to report as instructed may result in a denial of benefits for the weeks claimed.

Please keep in mind that:

Employers should not use "Show Up Pay" as a means for allowing employees to receive unemployment benefits while not working at all. Employees in total layoff status should be instructed to file a "Total" claim for unemployment benefits.

Thank you for your cooperation. Additional information about partial benefits or additional forms may be obtained online at <http://www.vec.virginia.gov> or by contacting Virginia Employment Commission at 1-866-354-5579.