

STATEMENT TO CORRECT WAGE INFORMATION PREVIOUSLY REPORTED TO VEC

Return To:
Virginia Employment Commission
Box 1358
Richmond, VA 23218-1358

Employer Name _____ VEC Account # _____
City/State/Zip _____

Corrections for Qtr./Yr. _____

Worker SSN	Name	Total Previously Reported	Should Be	Difference
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

From FC-20 Quarterly Report

	Reported	Should Be*	Difference
Line 1 Total Wages	_____	_____	_____
Line 2 Excess Over \$8,000	_____	_____	_____
Line 3 Taxable Wages	_____	_____	_____
Line 4 Tax Due	_____	_____	_____

* includes all changes made

Signature * _____ Date _____

* If you print out this form, please sign and mail to the address at the top of the form.
* Online submission: please fill out completely and type your email address in the signature box before you hit submit. Thank you.