

Request for Copies of Filed Payroll Tax Forms

Explanation of Fees

Type of Fee	Amount	Explanation
Document Fee	\$25.00 each	Fee for each document and filing period you request.
Historical Research Fee	\$100.00 for each year	This fee applies to each year prior to 2002 from which you request documents, and is in addition to the per-document fee listed above.
Shipping <ul style="list-style-type: none"> ◆ Fax or Email ◆ U.S. Postal Service 	No charge No charge	
Sales Tax	Your state's sales tax rate	Sales tax applies to all fees and shipping charges in Connecticut, District of Columbia, Hawaii, Ohio, South Dakota, Texas, and West Virginia.

Request for Copies of Filed Payroll Tax Forms 2002-Current

ACTIVE TERM

Company FEIN: _____ Company Name: _____ Date of Request: _____
 Contact Name: _____ Phone Number: _____ Is this for amended returns? YES
MUST MATCH PAYROLL CONTACT PERSON ON RECORD Extension: _____ E-mail: _____

Federal Please check requested forms

940 ANNUAL	20					20						20								
941 QUARTER	20	1	2	3	4	20	1	2	3	4	20	1	2	3	4	20	1	2	3	4

W-3 ANNUAL 20 20 20 **W-2 Employer's Copy All Employees** 20 20 20

W-2 Social Security #	Year(s)	Social Security #	Year(s)	Social Security #	Year(s)
	20 20 20		20 20 20		20 20 20
	20 20 20		20 20 20		20 20 20

State	Quarter	1st	2nd	3rd	4th	YEAR
AL	UNEMPLOYMENT					
AL	QUARTERLY WITHHOLDING					
AL	ANNUAL RECONCILIATION					
AK	UNEMPLOYMENT					
AZ	UNEMPLOYMENT					
AZ	QUARTERLY WITHHOLDING					
AZ	ANNUAL RECONCILIATION					
AR	UNEMPLOYMENT					
AR	ANNUAL RECONCILIATION					
CA	DE 6					
CA	DE 7					
CO	UNEMPLOYMENT					
CO	ANNUAL RECONCILIATION					
CT*	UNEMPLOYMENT					
CT*	QUARTERLY WITHHOLDING					
CT*	ANNUAL RECONCILIATION					
DE	UNEMPLOYMENT					
DC*	UNEMPLOYMENT					
FL	UNEMPLOYMENT					
GA	UNEMPLOYMENT					
GA	QUARTERLY WITHHOLDING					
GA	ANNUAL RECONCILIATION					
HI*	UNEMPLOYMENT					
HI*	HW-14 CLEARANCE ONLY					
ID	UNEMPLOYMENT					
IL	UNEMPLOYMENT					
IL	QUARTERLY WITHHOLDING					
IL	ANNUAL RECONCILIATION					Prior to 2008 only
IN	UNEMPLOYMENT					
IA	UNEMPLOYMENT					
IA	ANNUAL RECONCILIATION					
KS	UNEMPLOYMENT					
KS	ANNUAL RECONCILIATION					
KY	UNEMPLOYMENT					
KY	QUARTERLY WITHHOLDING					
KY	ANNUAL RECONCILIATION					
LA	UNEMPLOYMENT					
LA	ANNUAL RECONCILIATION					
ME	UNEMPLOYMENT					
ME	QUARTERLY WITHHOLDING					
ME	ANNUAL RECONCILIATION					
MD	UNEMPLOYMENT					
MD	ANNUAL RECONCILIATION					
MA	UNEMPLOYMENT					
MA	QUARTERLY WITHHOLDING					
MI	UNEMPLOYMENT					
MN	UNEMPLOYMENT AVAILABLE AT www.uimn.org					
MN	ANNUAL RECONCILIATION					
MS	UNEMPLOYMENT					
MO	UNEMPLOYMENT					
MT	UNEMPLOYMENT					
NE	UNEMPLOYMENT					
NE	QUARTERLY WITHHOLDING					
NE	ANNUAL RECONCILIATION					
NV	UNEMPLOYMENT					
NH	UNEMPLOYMENT					
NJ	COMBINED UIWH					
NM	UNEMPLOYMENT					
NM	ANNUAL RECONCILIATION					
NY	COMBINED UIWH					MTA-305
NC	UNEMPLOYMENT					
NC	ANNUAL RECONCILIATION					
ND	UNEMPLOYMENT					
ND	QUARTERLY WITHHOLDING					
ND	ANNUAL RECONCILIATION					
OH*	UNEMPLOYMENT					
OH*	ANNUAL RECONCILIATION					
OK	UNEMPLOYMENT					
OR	COMBINED UIWH					
PA	UNEMPLOYMENT					
PA	QUARTERLY WITHHOLDING					
RI	UNEMPLOYMENT					
SC	UNEMPLOYMENT					
SC	QUARTERLY WITHHOLDING					
SC	ANNUAL RECONCILIATION					
SD*	UNEMPLOYMENT					
TN	UNEMPLOYMENT					
TX*	UNEMPLOYMENT					
UT	UNEMPLOYMENT					
UT	ANNUAL RECONCILIATION					
VT	UNEMPLOYMENT					
VT	QUARTERLY WITHHOLDING					
VT	ANNUAL RECONCILIATION					
VA	UNEMPLOYMENT					
VA	QUARTERLY WITHHOLDING					
VA	ANNUAL RECONCILIATION					
WA	UNEMPLOYMENT					
WV*	UNEMPLOYMENT					
WV*	ANNUAL RECONCILIATION					
WI	UNEMPLOYMENT					
WI	ANNUAL RECONCILIATION					
WY	UNEMPLOYMENT					

SHIPPING INFORMATION

I prefer you send my copies:

E-MAIL

FAX#

Do you need a call before faxing? YES

U.S. MAIL

Address _____

FEE & PAYMENT INFORMATION

Document Fee (\$25 each form) +

Historical Research Fee
(if applicable: \$100 each year) +

SUBTOTAL =

Sales Tax* +

TOTAL DUE = \$

*Connecticut, District of Columbia, Hawaii, Ohio, South Dakota, Texas, and West Virginia Only

Payment for this request will be made by:

ACH (only available to current Tax clients)

MasterCard VISA

American Express Discover

Account # _____

Expiration Date (mmyy) _____

Name on Card _____

Auth. # _____

Notes _____

Please sign and fax this request to (866)293-2069

Intuit Payroll Services P.O. Box 30015 Reno, NV 89520

CUSTOMER AUTHORIZATION

I authorize the information listed above be delivered to me via the method I have checked above.
 I accept responsibility for the confidentiality of this information and agree to pay the fee listed above.

SIGNATURE OF A PRINCIPLE OR DULY AUTHORIZED OFFICER OF THE COMPANY REQUIRED.

PRINT NAME OF AUTHORIZED REPRESENTATIVE _____ DATE _____

AUTHORIZED CUSTOMER SIGNATURE _____