

33305-A

UI-4.1
(REV. 5/87)

CABINET FOR HUMAN RESOURCES
DEPARTMENT FOR EMPLOYMENT SERVICES
DIVISION OF UNEMPLOYMENT INSURANCE
FRANKFORT 40621

April 18, 1989

NOTICE TO FILE OR CORRECT REPORTS

In Reply Refer To: MM
078921-4

Magoffin Johnson &
Morgan Stone Co
P O Box 2320
Pikeville, Kentucky 41501-2320

Please complete the form (s) indicated below and return with a copy of this notice.

- UI-1, Application for Unemployment Insurance Employer Reserve Account
- UI-1S, Supplemental Application for Unemployment Insurance Employer Reserve Account
- UI-3S, Contribution Report (Return before due date.)
Quarter/Year _____ Rate _____
- UI-3.2, Request to Place Subject Employer's Account in Inactive Status
- UI-21, Report on Change of Ownership or Discontinuance of Business in Whole or in Part
(Partial transfers must show percentage of reserve transferred. Percentage should be based on amount of gross payroll transferred.)
- Form _____ attached on which you failed to complete item (s)

Please sign attached form _____

Please indicate date you resumed employment _____

Other, It is necessary we have this information before issuing
a clearance to the Secretary of State.

CC: Secretary of State
RETURN FORM WITHIN TEN (10) DAYS TO:

ATTN: Corporation Records Division

Tax Collections And Accounting Branch
Division of Unemployment Insurance
Frankfort, Kentucky 40621