

THIS IS YOUR FILE COPY

Filed 9/29/37

STATE OF CALIFORNIA

DEPARTMENT OF EMPLOYMENT
UNEMPLOYMENT RESERVES COMMISSION

11

CONTRIBUTION REPORT FOR AUGUST, 1937

This is your copy, keep in your files to facilitate verification by authorized representatives of the department. Make it an exact duplicate of the one mailed to the Department of Employment.

Send remittance with original return when mailing to the Department of Employment, 1025 P street, Sacramento. Do not send remittance to a branch office. Do not send coin, currency or stamps. Send check, cashier's check or money order payable to the California Unemployment Reserves Commission for the full amount of the contribution.

Contribution is due and payable on September 1, 1937, and delinquent October 1, 1937. If remittance is not postmarked on or before midnight of September 30, 1937, interest charges of 12 per cent per annum must be assessed under the law. The Act contains no provision for waiver of interest.

PAY ROLL DATA	For Employers Use	Leave This Blank
1. Wages (Cash or Check) paid <small>(Show pay roll period detail on Schedule A, reverse, Column 4)</small>	994.77	
2. Deduct amount of wages not subject <small>(Show pay roll period detail on Schedule A, reverse, Column 6)</small>	—	
3. Item 1 minus Item 2	994.77	
4. Add other remuneration (Subject to California Law) <small>(Show pay roll period detail on Schedule A, reverse, Column 7)</small>	417.50	
5. Total wages subject to Act. (Item 3 plus Item 4) <small>(Show pay roll period detail on Schedule A, reverse, Column 9)</small>	1412.27	
CONTRIBUTION DATA		
6. Employer's contribution (Item 5 x .018)	25.91	
7. Wage-earners' contributions (total actual deductions from pay rolls) <small>(Show pay roll period detail on Schedule A, reverse, Column 10)</small>	12.93	
8. Total contribution due and payable (Item 6 plus Item 7)	38.84	
EMPLOYMENT DATA		
9. Number of subject wage-earners as reported at end of last period <small>(Should correspond with number set forth under Item 12 of prior Contribution Report.)</small>	16	
10. Number of subject wage-earners added during the month	1	
11. Number of subject wage-earners terminated during the month	1 0	
12. Number of subject wage-earners at end of the month	17	

Is this the only contribution report submitted by your organization this month—

Yes No

If not, under what other Registration numbers are Contribution Reports submitted?

➡ If you are not subject; or if you have terminated your business; or if you receive forms under more than one Employer's Account Number for the same business entity, return this form with full explanation.

**Schedule A—COMPUTATION OF SUBJECT WAGES
PAY ROLL SUMMARY FOR MONTH OF AUGUST, 1937**

PAY ROLL PERIOD		TOTAL CALIFORNIA WAGES		DEDUCT WAGES NOT SUBJECT		ADD OTHER REMUNERATION (SCHEDULE B)	SUBJECT WAGES		WAGE-EARNERS' CONTRIBUTIONS ACTUALLY DEDUCTED
FROM	TO	NUMBER OF WAGE-EARNERS	AMOUNT	NUMBER OF WAGE-EARNERS	AMOUNT (SCHEDULE C)		NUMBER OF WAGE-EARNERS	AMOUNT	
1	2	3	4	5	6	7	8	9	10
8/2 - 8/31	8/31	17	\$ 494.77	—	\$ —	\$ 417.50	17	\$ 1439.50	\$ 27.33

Schedule B—OTHER REMUNERATION**

CLASSIFICATION (SEE INSTRUCTIONS, NUMBER 4)	AUGUST		CLASSIFICATION (SEE INSTRUCTIONS, NO. 4)	AUGUST	
	NUMBER OF WAGE-EARNERS	TOTAL VALUE OF OTHER REMUNERATION		NUMBER OF WAGE-EARNERS	TOTAL VALUE OF OTHER REMUNERATION
Meals		\$	Room and board	17	\$ 417.50
Room			Rent		
Apartment			* Not Classified Above		

* Remuneration "Not Classified" must be supported by full explanation as to its nature.
** Show only that "Other Remuneration" which is subject to the California Act.

Schedule C—WAGES NOT SUBJECT

(Prepare schedule on 8 1/2 x 11 paper in this form. If demonstrators, leased departments, or independent contractors, report details on Schedule D)

CLASSIFICATION (SEE INSTRUCTIONS, NUMBER 2)	AUGUST		Items shown in this classification must be supported by full explanation as to nature.
	NUMBER OF WAGE-EARNERS	TOTAL WAGES PAID	
		\$	

Schedule D—INDIVIDUALS OTHER THAN WAGE-EARNERS OF CONTRIBUTOR WORKING ON PREMISES

(Prepare schedule on 8 1/2 x 11 paper in this form itemizing detail)

CLASSIFICATION (SEE INSTRUCTIONS, NUMBER 2)	NAME OF EMPLOYER	ADDRESS OF EMPLOYER	NUMBER OF WAGE-EARNERS	WAGES—IF PAID BY CONTRIBUTOR (SAME AS SCHEDULE C)
August				\$

CERTIFICATE I HEREBY CERTIFY that I have examined this report and that the statements made and the figures shown herein, and in any accompanying schedule, are to the best of my knowledge and belief, a true and complete return, made in good faith, for August, 1937, pursuant to the California Unemployment Reserves Act, Chapter 352, Statutes of 1935.

STARLIGHT LAUNDRY
Name of Business or Contributor

PARTNER
Agent, or Officer if Corporation, Trustee, etc.

Title

SEPTEMBER 29 - 1937
Date

Interest at 12 per cent per annum must be added unless payment is made on or before Sept. 30, 1937. This is mandatory under the law. Interest is computed at 1/365th of 12% for each day's delinquency.

TYPE OF BUSINESS

Individual _____ Partnership Domestic Corp. _____
Foreign Corp. _____ Receivership _____
Other _____

IMPORTANT: Use only official reporting signature as shown on your registration statements unless changed as indicated on face of this report

- Attention, Please!** {
1. Have you completed data required on Lines 1-12, inclusive, on reverse side?
 2. Have you signed the report?
 3. Have you signed your check?

Special Note

DO NOT MAKE CORRECTIONS ON THE CONTRIBUTION REPORT COVERING ERRORS ON PRIOR REPORTS

Any corrections on prior reports must be handled by correspondence

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