FORM UCE-120A (REV. 3/11)

SOUTH CAROLINA DEPARTMENT OF EMPLOYMENT AND WORKFORCE

FORM ALIGNMENT BOXES EN

EMPLOYER QUARTERLY WAGE CONTINUATION SHEET

This is a machine readable form. For proper processing align typewriter or line printer to allignment boxes at top and carriage return down the form.

1. EMPLOYER NAME

2. Account Number

FORM ALIGNMENT BOXES

3. Quarter Ending Date

Page Number

6. Employee's Social Security Number 000 00 000000	7. Name: First, Middle Initial, Last	8. Total Wages
	9. TOTAL WAGES THIS PAGE	