



# pennsylvania

## PA Form UC-2A, Employer's Quarterly Report of Wages Paid to Each Employee



DEPARTMENT OF LABOR & INDUSTRY

See instructions on form UC-2INS. Information **MUST** be typewritten or printed in BLACK ink. Do NOT use commas (,) or dollar signs (\$). If typed, disregard vertical bars and type a consecutive string of characters. If hand printed, print in CAPS and within the boxes as below:

<b>SAMPLE Typed:</b>	123456.00	<b>SAMPLE Handwritten:</b>	1 2 3 4 5 6 . 0 0	<b>SAMPLE Filled-In:</b>	
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Employer name (Make corrections on Form UC-2B)	Employer PA UC account no.	Check digit	Quarter and year <b>Q / YYYY</b>	Quarter ending date <b>MM / DD / YYYY</b>

1. Name and telephone number of preparer	2. Total number of Pages in this report	3. Total number of employees listed in item 8 on all pages of Form UC-2A	4. Plant number (if approved)

  

5. Gross wages, <b>MUST</b> agree with item 2 on UC-2 and the sum of item 11 on all pages of Form UC-2A		6. Fill in this circle if you would like the Department to preprint your employee's names & SSNs on Form UC-2A next quarter	

7. Employee's Social Security Number	FI	MI	8. Employee's name LAST	9. Gross wages paid this quarter <b>Example: 123456.00</b>	10. Credit weeks

List any additional employees on continuation sheets in the required format (see instructions).

<b>11. Total gross wages for this page:</b> ____ <b>12. Total number of employees for this page:</b> ____		
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**13. Page** \_\_\_\_ **of** \_\_\_\_