

**NOTICE TO EMPLOYEES**

EMPLOYER REGISTRATION NUMBER

**EMPLOYEES OF THIS FIRM ARE COVERED BY THE NEW YORK STATE UNEMPLOYMENT INSURANCE LAW.**

NO DEDUCTIONS FROM WAGES MAY BE MADE FOR THIS PURPOSE.

**IF YOU ARE LAID OFF, WORK LESS THAN FOUR DAYS A WEEK, OR RESIGN, GET A "RECORD OF EMPLOYMENT" FORM FROM YOUR EMPLOYER. KEEP THIS FORM.**

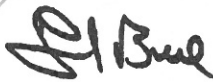
RECORD OF EMPLOYMENT FORMS REQUIRED BY REGULATION WILL CONTAIN YOUR EMPLOYER'S NAME, REGISTRATION NUMBER AND ADDRESS WHERE PAYROLL RECORDS ARE KEPT.

**IF YOU WISH TO FILE AN APPLICATION FOR UNEMPLOYMENT INSURANCE,**

GO TO YOUR NEAREST UNEMPLOYMENT INSURANCE OFFICE OR COMMUNITY SERVICE CENTER, REGISTER FOR WORK AND FILE FOR BENEFITS.

TAKE YOUR SOCIAL SECURITY ACCOUNT CARD AND YOUR "RECORD OF EMPLOYMENT" FORM WITH YOU.

JOHN SWEENEY  
COMMISSIONER OF LABOR

  
FREDERIC J. BUSE, DIRECTOR  
UNEMPLOYMENT INSURANCE DIVISION

**TO EMPLOYER: POST CONSPICUOUSLY IN EACH WORKPLACE.**

N.Y.S. DEPARTMENT OF LABOR  
LIABILITY AND DETERMINATION SECTION  
HARRIMAN STATE OFFICE CAMPUS  
ALBANY, NY 12240