

Confirmation No.:
Date Requested:
Account Number:

1-232-191-360 October 8, 2017 910-2995-9

MONEY ON BOOKS

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Quarterly Contribution Return and Report of Wages (DE 9) Quarter Ended: September 30, 2017								
A. No Wages Paid This Quarter	[X]							
B. Out of Business/No Employee	s []							
C. Total Subject Wages Paid This	Quarter	\$0.00						
D. Unemployment Insurance (UI) Ul Rate % Ul Taxable	(Total employee wages up to 7,000.00 per employee per calandar year)							
0.00 x \$0.00	=	\$0.00						
E. Employment Training Tax (ETT) ETT Rate % ETT Taxable Wages								
0.00 x \$0.00	=	\$0.00						
F. State Disability Insurance SDI Rate % SDI Taxabl	(Total employee wages up to 110,902.00 per employee per year) a Wages	calendar						
0.90 x \$0.00	=	\$0.00						
G. California Personal Income Ta	\$0.00							
H. Subtotal		\$0.00						
I. Less: (Contributions and Withholdings i (DO NOT Include Penalty and Int		\$0.00						
J. Total Taxes Due or Overpaid	(Item H minus Item I)	\$0.00						



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MONEY ON BOOKS

Quarterly	Contribution Return	and F	Report of Wages (Co	ontinuation) (DE 9C)			
Quarter En	ded: September 30, 2	2017					
A. Employees full-time and part-time who worked during or received pay subject to UI for the payroll period which includes the 12th of the month.			[] B. Reporting Voluntary DI wages[X] C. No Payroll[] D. Out of Business				
1st Month 0	2nd Month 0		3rd Month 0				
E. SSN	F. First Name	MI	Last Name	G. Total Subject Wages	H. Total PIT Wages	I. Total PIT Withheld	Wage Code
M. Grand To	otal Subject Wages	<u> </u>	N. Grand	Total PIT Wages	0. G	rand Total PIT	Withheld
0.00				0.00			0.00