

Alaska Quarterly Contribution Report Change Notification Sheet

(Return this page **only** if you have changes listed below.)

ALASKA DEPARTMENT OF LABOR
AND WORKFORCE DEVELOPMENT
EMPLOYMENT SECURITY TAX
P.O. BOX 115509
JUNEAU, AK 99811-5509

Relay Alaska: (800) 770-8973
Toll free: (888) 448-2937
Phone: (907) 465-2757
Fax: (907) 465-2374

Name and address:

Complete the information below:

Date: _____

Account number: _____

Federal ID number: _____

Quarter ending date: _____

If you have any changes, please complete and return this page. For assistance, contact your field office or central office listed below or email esd.tax@alaska.gov.

Anchorage (907) 269-4850
Fairbanks (907) 451-2876
Juneau (907) 465-2787

Kenai (907) 283-0350
Mat-Su (907) 707-1790
Central Office (888) 448-3527

ADDRESS CHANGES

Mailing address _____

Alaska physical address _____

- TELEPHONE NUMBER CHANGE _____
- ADD/CHANGE FAX NUMBER _____
- ADD/CHANGE EMAIL ADDRESS _____
- CLOSE ACCOUNT, CONTINUING BUSINESS WITH NO EMPLOYEES
DATE LAST WAGES PAID _____ / _____ / _____
- CLOSE ACCOUNT, DISCONTINUED BUSINESS, NO SUCCESSOR
DATE LAST WAGES PAID _____ / _____ / _____
- NAME CHANGE _____ EFFECTIVE DATE _____ / _____ / _____
- ENTITY CHANGE (type of change) _____ EFFECTIVE DATE _____ / _____ / _____
- FEDERAL ID NUMBER CHANGE _____ EFFECTIVE DATE _____ / _____ / _____
- OWNERSHIP CHANGE _____ EFFECTIVE DATE _____ / _____ / _____
(New owner's name and address) _____

EXPLANATION OF OWNERSHIP AND FEDERAL ID NUMBER CHANGES

Signed: _____ **Title:** _____

Printed name: _____ **Email:** _____

Phone number: () _____ **Ext:** _____