



XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Name

UC Employer Account No:

9999999999

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Address

Federal Employer ID No:

99 9999999

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

City

XX

State

99999

ZIP Code

Quarterly
Period Covered:

99 99 2015 - 99 99 2015
MM DD YYYY MM DD YYYY

See page 6 for electronic filing and payment requirements and options

	1st Month	2nd Month	3rd Month
1. For each month, enter the total of all full-time employees who worked during, or received pay reportable for unemployment insurance purposes for, the payroll period which includes the 12th of each month. If you had no employment in the payroll period, enter zero (0)..... 1.	999999	999999	999999
2. Number of female employees included on line 1. If none, enter zero (0) 2.	999999	999999	999999
3. Total unemployment compensation gross wages paid this quarter (from schedule 2, line 15) 3.	\$ 9999999999999999		99
4. EXCESS WAGES (SEE INSTRUCTIONS) 4.	\$ 9999999999999999		99
NOTE: THE TAXABLE WAGE BASE IS \$12,000 FOR EACH EMPLOYEE			
5. Taxable wages paid in this quarter (line 3 minus line 4) 5.	\$ 9999999999999999		99
6a. UC contribution rate . 99999 UC contributions due (line 5 times line 6a) 6b.	\$ 9999999999999999		99
7a. CSSF rate .0006 CSSF Assessment (line 5 times line 7a) 7b.	\$ 9999999999999999		99
Note: The CSSF assessment does not apply to direct reimbursable employers. See instructions.			
8. Total contributions and CSSF assessment due (line 6b plus line 7b)..... 8.	\$ 9999999999999999		99

Under penalties of perjury, I certify that the information contained on this return, report and attachment(s) is true and correct.

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999999999

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SCHEDULE 2 (FORM ME UC-1) 2015



99

Name: XXX

UC Employer Account No.: 9999999999

Federal Employer ID No: 99 9999999 Quarterly Period Covered: 99 99 2015 99 99 2015
 MM DD YYYY MM DD YYYY

Unemployment Contributions Wages Listing

All employers designated SEASONAL by the Maine Department of Labor. See instructions for column 13 on page 5.

11. Payee Name (Last, First, MI)	12. Social Security Number	13. UC Gross Wages Paid	
a. _____	999 99 9999	9999999 . 99	X
b. _____	999 99 9999	9999999 . 99	X
c. _____	999 99 9999	9999999 . 99	X
d. _____	999 99 9999	9999999 . 99	X
e. _____	999 99 9999	9999999 . 99	X
f. _____	999 99 9999	9999999 . 99	X
g. _____	999 99 9999	9999999 . 99	X
h. _____	999 99 9999	9999999 . 99	X
i. _____	999 99 9999	9999999 . 99	X
j. _____	999 99 9999	9999999 . 99	X
k. _____	999 99 9999	9999999 . 99	X
l. _____	999 99 9999	9999999 . 99	X
m. _____	999 99 9999	9999999 . 99	X
n. _____	999 99 9999	9999999 . 99	X
o. _____	999 99 9999	9999999 . 99	X
p. _____	999 99 9999	9999999 . 99	X
q. _____	999 99 9999	9999999 . 99	X
r. _____	999 99 9999	9999999 . 99	X

2D Bar Code space

14. Total of column 13 on this page 999999999 . 99

15. Total of columns 13 for ALL pages 999999999 . 99