

STATE OF NEW YORK—DEPARTMENT OF LABOR
DIVISION OF PLACEMENT AND UNEMPLOYMENT INSURANCE

Albany 1, N. Y.

QUARTERLY PAYROLL REPORT

- (1) Report for the calendar quarter begun Jan. 1, 1949 and ended Mar. 31, 1949
- (2) Total number of pages of this report, including continuation sheets (Form TW 57) 1
- (3) Total number of employees listed on this form and on continuation sheets (Form TW 57) 5
- (4) Total wages paid to employees during the quarter (see instructions). This total must agree with the total reported under Item 5 of Employer's Report of Contributions (Form TW 5) attached below, which **MUST** be submitted together with this report
\$ 7929.89

COPY TO BE RETAINED BY EMPLOYER

This copy must be carefully preserved by the employer at his place of business as a part of his payroll and wage records for a period of not less than six years, and should at all times be available for inspection.

TYPE OR PRINT. READ INSTRUCTIONS ON BACK OF EMPLOYER'S COPY

If this form is not prepared simultaneously with Federal Form SS-1a (Rev. Jan. 1947), no entries need be made in columns 8 and 9

BOTH NAME AND SOCIAL SECURITY ACCOUNT NUMBER OF EACH EMPLOYEE **MUST** BE REPORTED UNDER COLUMNS 6 and 7 **EVERY** QUARTER

Do Not Use This Space	Employee's Social Security Account Number			NAME OF EMPLOYEE (Type or Print)	Taxable Wages Paid under Federal Insurance Contributions Act		If Employed outside the State of Employer's Principal Place of Business Show State in Which Employed	Wages Subject to Contributions Under New York State Unemployment Insurance Law	
	Col. 6	Col. 7	Col. 8		Col. 9	Col. 10			
	063	01	0605	Eugene P. Henn				3000	00PC
	144	03	3497	Hamilton Reeve Pickering				2700	00
	117	09	0642	Frank Romer Grabhorn				1105	00
	104	14	5953	Jenny Lyn Entwistle				650	00
	065	09	9940	Helen Gallagher				474	89
(11) Total Wages Listed on This Page								\$7929	89

This combined report, Employer's Report of Contributions (Form TW5) and Quarterly Payroll Report (Form TW56), must be filed with the contributions due, on or before the last day of the first month following the close of the calendar quarter.

MAKE REMITTANCES PAYABLE TO: NEW YORK STATE UNEMPLOYMENT INSURANCE FUND.

MAIL ADDRESS: POST OFFICE BOX 1589, ALBANY 1, NEW YORK.

TW5 (1-48) **EMPLOYER'S REPORT OF CONTRIBUTIONS**

Read Carefully Instructions on Reverse Side of Employer's Copy

Report for calendar quarter begun Jan. 1, 1949 and ended Mar. 31, 1949

1. Total number of employees earning wages during the payroll period ending nearest the 15th of each calendar month of this quarter (include those who earned over \$3,000).

1st Month	2nd Month	3rd Month
5	5	5

2. Total number of different individuals earning wages at any time during the quarter (include those who earned over \$3,000). 5

3. Total remuneration for employment paid during this quarter. (See Instructions.) \$ 8679.89

4. LESS: Remuneration included in item 3 which represents amounts in excess of the first \$3,000.00 paid each worker during the calendar year. \$ 750.00

5. Wages subject to contribution. (Item 3 above less item 4.) \$ 7929.89

6. Contributions due—2.7% of item 5. \$ 214.11

7. Plus. Amounts previously underpaid. (See Instructions.) \$

8. Less: Amounts previously overpaid. (See Instructions.) \$

9. Less: Tax Credit. (Not to exceed Item 6 above. See Instructions.) \$ 131.47

10. Amount of Remittance. (Stamps not acceptable.) \$ 82.64

11. Has ownership (i.e., corporation, partnership, individual ownership) changed during the calendar quarter covered by this report? (Yes or no) NO If answer is yes, give information here: _____

12. Has nature of your business activity changed during calendar quarter? (Yes or no) NO

COPY TO BE RETAINED BY EMPLOYER

THE CAMBRIDGE GLASS COMPANY

Treasurer Apr. 21, 1949

THIS COPY MUST BE CAREFULLY PRESERVED BY THE EMPLOYER FOR A PERIOD OF NOT LESS THAN SIX YEARS

GENERAL INSTRUCTIONS

FOR PREPARING QUARTERLY PAYROLL REPORT (FORM TW 56) EMPLOYER'S REPORT OF CONTRIBUTIONS (FORM TW 5)

THIS COMBINED FORM, (TW 5 AND TW 56) AND CONTINUATION SHEETS, (TW 57) SHOULD BE FILED TOGETHER WITH THE CONTRIBUTION DUE. IF FORWARDED BY MAIL, USE THE PRE-ADDRESSED ENVELOPE.

DO NOT SEPARATE THE FORMS.

A. Quarterly Payroll Report (Forms TW 56 and 57) and Employer's Report of Contributions (Form TW 5) are required by Regulation from all employers liable to the New York State Unemployment Insurance Law on or before the last day of the first month following the close of the quarter.

LATE PAYMENTS OF CONTRIBUTIONS DUE PRIOR TO JULY 1, 1947 ARE SUBJECT TO INTEREST AT THE RATE OF 6% PER YEAR FROM THE DUE DATE TO THE DATE OF PAYMENT, AND TO AN ADDITIONAL PENALTY OF 5% OF THE AMOUNT DUE, INCLUDING INTEREST.

LATE PAYMENTS OF CONTRIBUTIONS DUE ON AND AFTER JULY 1, 1947 ARE SUBJECT TO INTEREST AT THE RATE OF $\frac{3}{4}$ OF 1% PER MONTH OR FRACTION THEREOF, FROM THE DUE DATE TO THE DATE OF PAYMENT.

B. REPORTS MUST BE SUBMITTED EVEN THOUGH NO WAGES WERE PAID DURING THE CALENDAR QUARTER.

C. REMUNERATION AND WAGES TO BE REPORTED SHALL INCLUDE ALL AMOUNTS PAID FOR EMPLOYMENT COVERED BY THE LAW DURING THE CALENDAR QUARTER FOR WHICH THIS REPORT IS SUBMITTED.

REMUNERATION AND WAGES ARE REGARDED AS PAID, EVEN IF NOT ACTUALLY PAID, IN THE QUARTER FOR WHICH THIS REPORT IS SUBMITTED IF SUCH QUARTER INCLUDES THE FIRST DATE ON WHICH PAYMENT OF SUCH REMUNERATION AND WAGES IS GENERALLY MADE BY THE EMPLOYER OR THE DATE ON WHICH PAYMENT OF SUCH REMUNERATION AND WAGES MUST BE MADE UNDER ANY AGREEMENT, CONTRACT OR PROVISION OF LAW, WHICHEVER DATE IS THE EARLIER.

IF NO FIXED DATE FOR PAYMENT OF SUCH REMUNERATION AND WAGES EXISTS, THEY ARE REGARDED AS PAID IN THE QUARTER FOR WHICH THIS REPORT IS SUBMITTED, IF BOTH THE AMOUNT AND THE LIABILITY OF THE EMPLOYER FOR THE PAYMENT THEREOF ARE UNCONDITIONALLY ESTABLISHED DURING SUCH QUARTER.

D. "Remuneration" shall mean the total amount of every form of compensation for employment directly or indirectly paid to

an employee by his employer, including salaries, commissions, bonuses, and the reasonable value of board, rent, housing, lodging or similar advantage received. When gratuities are received by the employee in the course of his employment from persons other than his employer, the value of such gratuities (tips) shall be deemed and included as part of his remuneration paid by his employer.

Remuneration **shall not** include any amount paid for (a) sickness or accident disability, (b) dismissal payments which the employer is not legally required to make. (See Section 517 of the New York State Unemployment Insurance Law.)

E. "Wages" shall mean the first three thousand dollars of remuneration paid to an employee by each of his employers during any calendar year.

F. An employer who has more than one place of employment shall combine all payrolls of such various places of employment and shall submit a single Employer's Report of Contributions (Form TW 5) and a single Quarterly Payroll Report (Forms TW 56 and 57), using the registration number specifically assigned to him for reporting contributions and individual wages. In preparing the Quarterly Payroll Report Continuation Sheets (Form TW 57), employees should be grouped, insofar as possible, by place of employment (city or town). If the address shown by the addressograph impression under Item 5 of the Quarterly Payroll Report Continuation Sheet (Form TW 57) is not the same as the place of employment, each such sheet should indicate, just below the addressograph impression, the city or town only in which the particular establishment is located. Such employer shall also submit an Employers Industry and Location Report (Form RS6), listing payroll data by industry and place of employment.

G. Corrected and Amended reports should be marked "**Supplemental Reports**" and should indicate **DIFFERENCES ONLY** between original and corrected figures.

H. A final report on this form from an employer who ceases to be liable for contributions should be clearly indicated by the notation "FINAL REPORT."

INSTRUCTIONS FOR PREPARING QUARTERLY PAYROLL REPORT (TW 56)

This form has been designed so that it may be prepared simultaneously with Federal Form SS-1a (Rev. Jan. 1947). If so prepared, Column 10 need not be filled out when all entries would be identical with all corresponding entries in Column 8. On each page when one or more entries in Column 10 would differ from the entries in Column 8, Column 10 must be filled out **for all** employees on that page.

Item 2—TOTAL NUMBER OF PAGES IN THIS REPORT. If there is not enough space to list all employees on this form (TW 56), use continuation sheets (Form TW 57). Each such continuation sheet should show a page number, beginning with page number 2. Enter as Item 2 the total number of pages in this report.

Item 4—TOTAL WAGES PAID. See General Instructions "C" above. The total wages reported on all pages of this report should agree with the amount reported for the same quarter under Item 5 of Employer's Report of Contributions (Form TW 5).

Item 5—EMPLOYER'S NAME, ADDRESS AND REGISTRATION NUMBER. If the employer's name, business address or registration number is incorrectly shown on the form when received from the Division, make any changes necessary to correct name, address or registration number but do not erase.

Col. 6—EMPLOYEE'S SOCIAL SECURITY ACCOUNT NUMBER.

Enter the employee's insurance account number issued to him by the Social Security Board.

EVERY EMPLOYEE SHOULD HAVE A SOCIAL SECURITY ACCOUNT NUMBER. Whenever a Social Security Account Number is obtained for an employee whose name appeared on a previous report without an account number, this Division should be notified by letter of the employee's name, account number, and the date of the quarterly report on which the name appeared without an account number.

ALL EMPLOYEES, who are paid any remuneration during a calendar quarter, shall be listed, whether or not the amount paid is subject to contributions. The TOTAL AMOUNT paid to an employee during any calendar quarter shall be reported

for that quarter UNLESS the amount so paid, when added to amounts paid to and reported for the same employee in previous quarters of the same calendar year, EXCEEDS \$3,000.00. In that quarter only the difference between \$3,000.00 and the amount previously reported, should be entered.

Example: If \$2,800.00 was reported in the first two quarters, the report for the third quarter, irrespective of the amount paid during that quarter, should show \$200.00 only.

Col. 7—NAME OF EMPLOYEE. Employee's name must be reported every quarter. If the employee states that no Social Security Account number has been issued to him, the employer shall make no entry in Column 6, but shall give the present address of such employee in Column 7 in addition to the name.

Col. 8 and 9—TAXABLE WAGES PAID, AND STATE. If this form is not prepared simultaneously with the Federal Report Form SS-1a (Rev. Jan. 1947), no entries need be made in Columns 8 and 9.

Col. 10—WAGES SUBJECT TO CONTRIBUTIONS UNDER NEW YORK STATE UNEMPLOYMENT INSURANCE LAW. (See General Instructions "E" above.) Report the total wages paid to the employee during the calendar quarter.

Item 11—TOTAL FOR THIS PAGE. If no entries are made in Column 10, the page total entered as Item 11, Column 8, will be considered to be the wages subject to contributions under the New York State Unemployment Insurance Law. If entries are made in Column 10, the page total for this column must also be shown as Item 11, Column 10. Total **should not** be carried forward from page to page.

THE GRAND TOTAL OF ALL PAGE TOTALS MUST BE ENTERED AS ITEM 4 OF THIS REPORT.

INSTRUCTIONS FOR PREPARING EMPLOYER'S REPORT OF CONTRIBUTIONS (TW 5)

Item 1.—Enter the total number of employees covered by the law during the payroll period ending nearest the 15th of each calendar month of the quarter. **Include those employees who have already earned more than \$3,000 during this calendar year.** This figure is the total of all employees on weekly and semi-monthly payrolls ending nearest the 15th of each month; all employees on monthly payrolls; and all employees on other types of payrolls ending nearest the 15th of each month.

Item 2.—Enter the total number of different individuals who were earning wages at any time during the quarter. **Include those employees who have already earned more than \$3,000 during the calendar year.**

Item 3.—Enter the total of all remuneration paid to all employees, including amounts in excess of \$3,000. per annum. (See General Instructions "D" above).

Item 7.—Enter payment for amounts previously underpaid. This includes payment of contributions due, interest and penalty. Attach Statement or other document from this Division requiring such payment.

Adjustment of wages for previous calendar quarters should not be made here but must be reported on separate Forms TW

5 and TW 56 or TW 57 for each calendar quarter to which the adjustment applies. Such reports shall be marked "**Supplemental Report.**"

Item 8.—Enter deductions for amounts previously overpaid. Substantiate deductions by a Statement or other document from this Division authorizing such deductions.

Item 9.—Enter the amount of payment being made by Tax Credit, not to exceed either the amount of contributions due entered in Item 6, or the amount of tax credit still outstanding to your account. Balance of tax credit remaining after this payment should **not** be entered on this report.

Item 12.—Indicate whether or not principle type of industrial activity or product has changed since submitting your last quarterly report.

Item 13.—SIGNATURES. This report must be signed by (1) the individual if the employer is an "individual"; (2) by the president, treasurer or other principle officer if the employer is a corporation; or (3) a responsible and duly authorized member having knowledge of firm's affairs if the employer is a partnership or other unincorporated organization.

COMMISSION STATEMENT FOR MONTH OF _____

THE CAMBRIDGE GLASS COMPANY

New York office
 AGENT
 ADDRESS

CAMBRIDGE, OHIO, _____

19 _____

APPROVED _____

SALES DEPT. _____

DATE	NAME OF CUSTOMER	MISC.		PER CENT	PER CENT	PER CENT	COMM.
		%	AMOUNT				
1	Report Jan. 1 - 1949 to Mar 31 - 1949						
2	Total wages	1					
3	Total Employees	5					
4	Total Taxable wages		792989				
	Col 6		Col 7			Col 10	
063-01-0605	Eugene P. Keen					300000	P.C.
144-03-3497	Hamilton Reese Pickering					270000	
117-09-0642	Frank Roman Grabhorn					110500	
104-14-5953	Jenny Lynn Entwistle					65000	
065-09-9940	Kileen Gallagher					47489	
11	Total wages listed					792989	

Employer's Report of Contributions

Report Jan. 1 - 1949 to Mar. 31 - 1949

	1st mo	2nd mo	3rd mo
1 Total Employees	5	5	5
2 Total listed	5		
3 Total wages paid		867989	
4 Less over 3000.00		75000	
5 Wages subject to Contribution		792989	
6 Contribution 2.7%		21411	
7			
8			
9 Less Tax Credit		13147	
10 Remittance		8264	