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TABLE : ar204

ETA 204, Experience Rating Report

REPORT PERIOD ENDED: _____ REGION: _____ STATE: _____

Rate Year End: **c1** Computation Date: **c2** Rating System: **c3**

Section A: All Subject Accounts: Number & Amounts of Total & Taxable Payroll

No. As of: **c4** Payroll 12 mo. End: **c5**

	LINE NO.	(1)	Total (2)	Taxable (3)
1. Taxable Accts. Total	101	C6	C7	C8
a. Eligible	102	C9	C10	C11
B. Ineligible	103	C12	C13	C14
2. Reimbursable Accts	104	C15	C16	

RESERVE RATIO STATES ONLY:

3. Sub. Act.(+ or 0 bal.)	201	C17	c18	C19
a. Eligible	202	C20	C21	C22
B. Ineligible	203	C23	C24	C25
4. Sub. Act. (- balance)	204	C26	C27	C28
a. Eligible	205	C29	C30	C31
B. Ineligible	206	C32	C33	C34

SECTION B. Summary of Benefits Paid, Charged, and Noncharged

	Line No.	
6. Total Benefits (or Benefit Wages) Paid During		
12 months ending: c35	301	C36
7. Taxable Employer Accounts	302	C37
A. Charged	303	C38
1. Active	304	C39
2. Inactive	305	C40
B. Noncharged	306	C41
8. Reimbursable Employer Accounts	307	C42
a. Charged	308	C43
B. Noncharged	309	C44