

ER RRB Employer Reporting System

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US Railroad Retirement Board
(Form ID-4E (11-05))

Form Approved
OMB No. 3220-0171

Form ID-4E

Notice of Payment of Unemployment or Sickness Benefits
New Items

ID-4E for 2112-Springfield Terminal Rwy

This is notice of the RRB's determinations on claims for benefits under the Railroad Unemployment Insurance Act. Base-year service and compensation were reported by your company for this individual. As a base year employer, you have the right to request reconsideration of the determination to pay benefits on this notice.

Instructions: If you do not object to the payment, no action is required. Delete the record to remove it from your *New Items* list. If you wish to request reconsideration of the RRB's decision to pay benefits, you may mail a request to the RRB office shown below, or you may electronically submit your request by clicking the "SSN" link below. Your request must be received by the RRB within 60 days of the date of this notice.

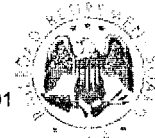
Delete Marked Items

Or you may delete by Notice Date :

<input type="checkbox"/>	SSN	Notice Date	Employee Name	Payroll ID	Claim Begin Date	Claim Profile	Type Of Benefit	Gross Pay	Amount Charged	District Office
<input type="checkbox"/>		7/30/2008			7/1/2008	1111111111111111	SI	\$427.00	\$427.00	JACKSONVILLE FL
<input type="checkbox"/>		8/28/2008			8/3/2008	1111111111111111	SI	\$610.00	\$610.00	BOSTON MA
<input type="checkbox"/>		8/28/2008			7/1/2008	1111111111111111	UI	\$427.00	\$427.00	NEW YORK NY
<input type="checkbox"/>		8/28/2008			7/15/2008	1111111111111111	UI	\$610.00	\$610.00	NEW YORK NY
<input type="checkbox"/>		8/28/2008			7/29/2008	1111111111111111	UI	\$610.00	\$610.00	NEW YORK NY
<input type="checkbox"/>		8/28/2008			7/29/2008	1111111111111111	SI	\$610.00	\$610.00	BOSTON MA
<input type="checkbox"/>		8/29/2008			8/7/2008	1111111111111111	UI	\$610.00	\$610.00	BOSTON MA
<input type="checkbox"/>		9/4/2008			8/12/2008	1111111111111111	SI	\$610.00	\$610.00	BOSTON MA
<input type="checkbox"/>		9/9/2008			5/29/2008	9191111111111111	UI	\$472.00	\$472.00	BOSTON MA
<input type="checkbox"/>		9/9/2008			7/19/2008	1111111111111111	SI	\$610.00	\$610.00	BOSTON MA



U.S. Railroad Retirement Board
844 North Rush Street
Chicago Illinois, 60611-2092
Telephone: (312) 751-7139 TTY: (312) 751-4701
[Contact an RRB office near you](#)



(INTERNET)
ID - 4E Request/REPLY

ER RRB Employer Reporting System

[Logout](#)

US Railroad Retirement Board
Form ID-4E(11-05)

Form Approved
OMB No. 3220-0171

Form ID-4E
Notice of RUIA Claim Determination
ID-4E for 2112-Springfield Terminal Rwy

Reconsideration Request

Submitted By:

BA Number: 2112

Name:

Email:

Phone Number:

of payments to:

SSN:

Employee Name:

Claim Begin Date: 7/1/2008

will be sent to:

I am requesting reconsideration of your decision to pay benefits to the above employee for the following reason(s).

Your logon ID will serve as your signature.

When you click the Submit Request button, this request will be sent to the RRB office shown on above. Any further communication regarding this request should be directed to that office.

Paperwork Reduction Act Notice



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ID-4E (INTERNET) PRA SCREEN

Paper Work Reduction Act - Microsoft Internet Explorer provided by U.S. Railroad Retirement Board

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Media Print Copy Paste

Address <http://rrbappc2/webapps/ersnet/PaperWorkReduction.aspx> Go Links

Paper Work Reduction Act

Section 5(b) of the Railroad Unemployment Insurance Act (RUIA) requires the RRB to provide notice of claims for benefits to base-year employers. Employer responses to these notices are voluntary. Failure to provide information about questionable claims for benefits, however, may affect the amount that an employer is charged in benefits and the employer's tax contribution rate under the RUIA.

The amount of time required for an employer to participate in the prepayment claims verification process varies depending upon the extent to which the employer is able to use automated systems. We estimate the average responding burden for employers to be:

- Internet Form ID-4K 2 minutes per response
- Internet Form ID-4E 2 minutes per response

These estimates are based on employer experience nationwide. The estimates include time for reviewing instructions, obtaining needed data, and reviewing the completed responses. Federal agencies may not conduct or sponsor, and respondents are not required to respond to a collection of information unless it displays a valid OMB number. If you wish, send comments concerning the accuracy of our estimates or any other aspect of this program, including suggestions for reducing reporting time, to the Chief of Information Management, Railroad Retirement Board, 844 N. Rush Street, Chicago, Illinois 60611-2092 and the Office of Management and Budget, Paperwork Reduction Project (3220-0171), Washington, DC 20503.

Done Local intranet

Start | [Icons] | [Inbox - Micros...] [Session1 - myE...] [ERS - ID-4K Re...] [Paper Work ...] 1:21 PM

Office [Icons] Microsoft