U.S. Department of Labor
Bureau of Labor Statistics
Data Collection Center
dccaddress2
dcccity2, dccst2 dcczip
Phone: dccphone Fax: faxphone

BLS

► Information We Have For Your Firm:

MP	MF	INT

Con_Firm
Con_Address
Con_City, Con_State Con_Zipcode

Contact: Attn: Payroll Manager2
Tel: con_tel   **Ext:** con_ext
Fax: con_fax

►Report payroll information for the pay period that includes the 12th of the month.

FAX TO: faxphone2

Reference Month/Year: mon1 year1	1 Employee Count	2 Women Employee Count	3 Payroll, Excluding Commissions	4 Commissions	5 Total Hours, Including Overtime	6 Overtime Hours (Whole hours)
Report #: reptnum **State:** STC **Location:** REGlocation **UI:** ReptUI						
Pay Type: *pay-type1* — All Employees						
Production Employees						
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If you need the instructions to fill out this form, please call: dccphone2