



Create New 4212 Report

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* - Required Information

* Type of Reporting Organization: Select...

* Type of Form: Select...

COMPANY IDENTIFICATION INFORMATION

* Company No.
T213937

* Twelve-month period ending: (mm/dd/yyyy)
[Calendar icon]

* Name of Parent Company:
DOL Test

* Address (Number And Street):
200 Constitution Ave NW

* City: Washington County:

* State: DC * Zip Code: (5 digits)
20210

* Name of Company Contact:
William Coughlin

* Contact Telephone: 2026934715 * Contact Email: jumper0155@yahoo.com

Name of Hiring Location:

Address (Number And Street):

City County:

State: Select... Zip Code:

NAICS: (6 digits)
000000

DUNS: (9 digits)
000000000

EIN / IRS Tax No. (9 digits)
999999910

INFORMATION ON EMPLOYEES

Report the total number of employees and new hires who are protected veterans, as defined in the instructions. Data on number of employees are to be entered in column A and B, line 1.1 through 9. Data for new hires are entered in columns C and D. Line 10 is total of each column. Entries in columns C and D, lines 1.1 through 9 (gray shaded areas) are optional. Enter the maximum and minimum number of employees.

INFORMATION ABOUT NUMBER OF EMPLOYEES AND NEW HIRES WHO ARE PROTECTED VETERANS

JOB CATEGORIES		NUMBER OF EMPLOYEES		NEW HIRES (PREVIOUS 12 MONTHS)	
		PROTECTED VETERANS (A)	TOTAL EMPLOYEES, BOTH VETERANS AND NON-VETERANS (B) (S)	PROTECTED VETERANS (C)	TOTAL NEW HIRES, BOTH VETERANS AND NON-VETERANS (D)
EXECUTIVE SENIOR LEVEL OFFICIALS AND MANAGERS	1.1	0	0	0	0
FIRST/MD LEVEL OFFICIALS AND MANAGERS	1.2	0	0	0	0
PROFESSIONALS	2	0	0	0	0
TECHNICIANS	3	0	0	0	0
SALES WORKERS	4	0	0	0	0
ADMINISTRATIVE SUPPORT WORKERS	5	0	0	0	0
CRAFT WORKERS	6	0	0	0	0
OPERATIVES	7	0	0	0	0
LABORERS/HELPERS	8	0	0	0	0
SERVICE WORKERS	9	0	0	0	0
TOTAL	10	0	0	0	0

Report the total maximum and minimum number of permanent employees during the period covered by this report

Maximum Number: 0 Minimum Number: 0

Submit Form Cancel