[STATE] DEPT OF LABOR BUREAU OF LABOR STATISTICS P.O. BOX 303030 Small Town, ST 000010001

Phone: (555) 8881200 ext 203 Email: MWR\_ST@bls.gov



BLS 3020 - Multiple Worksite Report

**MANDATORY** 

NAME COMPANY NAME ADDRESS LINE 1 ADDRESS LINE 2 CITY, ST ZIP-ZIP4

December 2021

U.I. NUMBER QUARTER ENDING DUE DATE 0123456789 DECEMBER 31, 2021 JANUARY 31, 2022

Dear Employer,

The U.S. Bureau of Labor Statistics (BLS) and the [STATE] Dept of Labor request that you provide your company's employment and wages each quarter using the BLS 3020 Multiple Worksite Report (MWR) for businesses with more than one location in [STATE].

Your primary location is the location with the most employees in [STATE]. If your business has 10 or more employees working at secondary locations in [STATE], you should complete an MWR. Individual teleworkers should not be considered locations.

If your business has only one location in [STATE], you can disregard this notice.

Please use the User ID and password below to log into our secure website: https://idcf.bls.gov/

USER ID: 106123456789 PASSWORD: Aa123456

When you log into the system and select your account, you will only see one location. Select "add an additional worksite" to add all additional locations in the [STATE].

This survey is mandatory in accordance with Sections 123, 345, Chapter 10, Title 20 of the [STATE] Code and is authorized by 29 U.S. Code, Section 2. It is approved by O.M.B. No. 12200134.

Information collected in this report by BLS and State agencies cooperating in its statistical programs will be used for statistical and Unemployment Insurance program purposes, and other purposes in accordance with law. Additional information can be found online: https://www.bls.gov/respondents/mwr.

The due date for your response is **January 31, 2022**. Thank you in advance for your cooperation.

Sincerely,

**Emily Thomas** 

U.S. Bureau of Labor Statistics

