

LEGAL NAME
TRADE NAME
ADDRESS LINE 1
ADDRESS LINE 2
CITY STATE ZIP

Account No.:
9999999-999-9

Statement for Transactions Posted:
12/01/2025 through 12/13/2025

This statement shows benefit charges and/or adjustments related to your Unemployment Insurance account during the statement period indicated.

If you have questions about...	Call...	Telephone number...
Benefit eligibility or your benefit charges	Bureau of Benefit Operations	(414) 438-7705
Benefit adjustments or missing statements	Bureau of Tax and Accounting	(608) 266-9989

Section A - Summary of Sections B and C, Benefit Charges and Benefit Adjustments

Total Section B Benefit Charges:	9,635.91
Total Section C Net Benefit Adjustment:	(738.16)
Net Charge:	8,897.75

Section B - Benefit Charges

The legend for the codes follows the table.

Week No.	Week Ending	Amount Charged	Wages Reported	Employee Name	SSN
48/25	11/29/2025	370.00	0.00	DOE, JANE M	XXX-XX-1111
49/25	12/06/2025	370.00	0.00	DOE, JANE M	XXX-XX-1111
48/25	11/29/2025	37.00	0.00	DOE, JENNY M	XXX-XX-1122
48/25	11/29/2025	314.00	0.00	DOE, JENNY M	XXX-XX-1122
48/25	11/29/2025	19.00	0.00	DOE, JENNY M	XXX-XX-1122
49/25	12/06/2025	19.00	0.00	DOE, JENNY M	XXX-XX-1122
49/25	12/06/2025	314.00	0.00	DOE, JENNY M	XXX-XX-1122
49/25	12/06/2025	37.00	0.00	DOE, JENNY M	XXX-XX-1122
48/25	11/29/2025	A	370.00	0.00	DOE, JOHN
49/25	12/06/2025		370.00	0.00	DOE, JOHN
48/25	11/29/2025		314.00	0.00	DOE, JILL M
48/25	11/29/2025		37.00	0.00	DOE, JILL M



Section B - Benefit Charges, continued

Week No.	Week Ending	Amount Charged	Wages Reported	Employee Name	SSN
48/25	11/29/2025	19.00	0.00	DOE, JILL M	XXX-XX-1144
49/25	12/06/2025	19.00	0.00	DOE, JILL M	XXX-XX-1144
49/25	12/06/2025	37.00	0.00	DOE, JILL M	XXX-XX-1144
49/25	12/06/2025	314.00	0.00	DOE, JILL M	XXX-XX-1144
48/25	11/29/2025	314.00	0.00	DOE, JORDAN	XXX-XX-1155
48/25	11/29/2025	37.00	0.00	DOE, JORDAN	XXX-XX-1155
48/25	11/29/2025	19.00	0.00	DOE, JORDAN	XXX-XX-1155
49/25	12/06/2025	314.00	0.00	DOE, JORDAN	XXX-XX-1155
49/25	12/06/2025	19.00	0.00	DOE, JORDAN	XXX-XX-1155
49/25	12/06/2025	37.00	0.00	DOE, JORDAN	XXX-XX-1155
49/25	12/06/2025	15.30	0.00	DOE, JOLENE M	XXX-XX-1166
49/25	12/06/2025	29.79	0.00	DOE, JOLENE M	XXX-XX-1166
49/25	12/06/2025	252.85	0.00	DOE, JOLENE M	XXX-XX-1166
48/25	11/29/2025	370.00	0.00	DOE, JESSICA	XXX-XX-1177
49/25	12/06/2025	370.00	0.00	DOE, JESSICA	XXX-XX-1177
49/25	12/06/2025	370.00	0.00	DOE, JAMES	XXX-XX-1188
49/25	12/06/2025	B 1.47	90.00	DOE, JULIE	XXX-XX-1199
45/25	11/08/2025	143.00	0.00	DOE, JEFF M	XXX-XX-2211
46/25	11/15/2025	370.00	0.00	DOE, JEFF M	XXX-XX-2211
47/25	11/22/2025	145.00	0.00	DOE, JEFF M	XXX-XX-2211
47/25	11/22/2025	225.00	0.00	DOE, JEFF M	XXX-XX-2211
48/25	11/29/2025	370.00	0.00	DOE, JEFF M	XXX-XX-2211
49/25	12/06/2025	370.00	0.00	DOE, JEFF M	XXX-XX-2211
49/25	12/06/2025	37.00	0.00	DOE, JOANNA	XXX-XX-2222
49/25	12/06/2025	314.00	0.00	DOE, JOANNA	XXX-XX-2222
49/25	12/06/2025	19.00	0.00	DOE, JOANNA	XXX-XX-2222
48/25	11/29/2025	288.66	0.00	DOE, JACK M	XXX-XX-2233
49/25	12/06/2025	288.66	0.00	DOE, JACK M	XXX-XX-2233
49/25	12/06/2025	240.02	0.00	DOE, JASON	XXX-XX-2244
48/25	11/29/2025	37.00	0.00	DOE, JANELLE M	XXX-XX-2255
48/25	11/29/2025	314.00	0.00	DOE, JANELLE M	XXX-XX-2255
48/25	11/29/2025	19.00	0.00	DOE, JANELLE M	XXX-XX-2255
49/25	12/06/2025	349.15	0.00	DOE, JEROME	XXX-XX-2266
49/25	12/06/2025	19.00	0.00	DOE, JASPER M	XXX-XX-2277
49/25	12/06/2025	314.00	0.00	DOE, JASPER M	XXX-XX-2277
49/25	12/06/2025	37.00	0.00	DOE, JASPER M	XXX-XX-2277
49/25	12/06/2025	18.97	0.00	DOE, JULIAN	XXX-XX-2288
49/25	12/06/2025	36.94	0.00	DOE, JULIAN	XXX-XX-2288
49/25	12/06/2025	254.57	0.00	DOE, JULIAN	XXX-XX-2288
49/25	12/06/2025	35.94	0.00	DOE, JULIAN	XXX-XX-2288
49/25	12/06/2025	22.96	0.00	DOE, JULIAN	XXX-XX-2288
48/25	11/29/2025	127.46	297.46	DOE, JESSIE M	XXX-XX-2299
48/25	11/29/2025	1.36	297.46	DOE, JESSIE M	XXX-XX-2299
49/25	12/06/2025	126.10	297.46	DOE, JESSIE M	XXX-XX-2299
49/25	12/06/2025	2.71	297.46	DOE, JESSIE M	XXX-XX-2299

Total Benefit Charges: 9,635.91

A - First check paid for a new benefit year

B - Payment that exhausts employer liability in the benefit year

Codes**Section C - Adjustments to Benefit Claims**

"Reason" (fourth column below) is more fully described following the table.

Employee Name	SSN	Week Number	Reason	Amount Charged or (Credited)
DOE, JANE M	XXX-XX-1111		Overpayment	(370.00)
DOE, JANE M	XXX-XX-1111		Overpayment	(370.00)
DOE, JUDITH	XXX-XX-3311		Overpayment	(31.41)
DOE, JOYCE M	XXX-XX-3322		Overpayment	(49.23)
DOE, JACKIE	XXX-XX-3333		Out-of-state	134.47
DOE, JARED M	XXX-XX-3344		Overpayment	8.30
DOE, JARED M	XXX-XX-3344		Overpayment	(1.32)
DOE, JANICE	XXX-XX-3355		Overpayment	(52.39)
DOE, JESSIE M	XXX-XX-2299		Overpayment	(1.35)
DOE, JESSIE M	XXX-XX-2299		Overpayment	(1.35)
DOE, JESSIE M	XXX-XX-2299		Overpayment	(1.35)
DOE, JESSIE M	XXX-XX-2299	48/25	Part-time	(1.26)
DOE, JESSIE M	XXX-XX-2299	49/25	Part-time	(1.27)
Net Benefit Adjustment				(738.16)

Reasons for Adjustments (Section C)

Out-of-state - Charge/Credit for your share of unemployment benefits paid in another state in a combined-wage claim.

Overpayment - Adjustment based on an overpayment determination.

Part-time - Adjustment for your share of payment to a part-time employee [section 108.07(3m) and (3r), Wisconsin Statutes].



