TEST INSURER 2 C/O TEST INSURER 2 RM C100 201 E WASHINGTON AVE MADISON WI 53703

WC CLAIM NO: 9999-999999 IF YOU CALL OR WRITE US
INJURY DATE: 05/01/85 PLEASE USE WC CLAIM NO.

EMPLOYEE: SAMPLE SIMPLES, SAMPLE EMPLOYER: SAMPLE EMPLOYER INC

**INSURER NO:** 

DWD 80.02(2)(b) requires that self-insured employers and insurance companies submit a Supplementary Report, WKC-13, to the Department on or before the 30<sup>th</sup> day following a claim's date of injury. The WKC-13 for the above referenced claim was not filed timely as provided for by administrative rule.

For failing to file the required WKC-13 report in a timely manner the Department is assessing you a \$100 surcharge payable to the State of Wisconsin pursuant to s.102.35(1), Wis. Stats. *Please do not pay now*. The Department will record each surcharge you incur and invoice you annually for the total amount due.

You may request a waiver of this surcharge within 45 days of the date of this letter. Please include any information that would show a mistake was made or that the report was submitted on time.

Failure to file required reports may also result in further sanctions by the Worker's Compensation Division under ss.102.28(2)(c) or 102.31(3), Wis. Stats., or by the Office of the Commissioner of Insurance under s.601.64, Wis. Stats.

To find out what other reports are overdue and avoid surcharges in the future, go to the Worker's Compensation web site's Insurers' Pending Reports at <a href="https://dwd.wisconsin.gov/wc/insurance/pending-rpts.htm">https://dwd.wisconsin.gov/wc/insurance/pending-rpts.htm</a>.

Department of Workforce Development Worker's Compensation Division

SWC13 (R.11/2014)