

**QUARTERLY RETURN PAYMENT VOUCHER
FOR MAINE UNEMPLOYMENT CONTRIBUTIONS**

Maine Revenue Services
P.O. Box 9101
Augusta, ME 04332-9101



99

Form ME UC-1-PV

1506403

Business Name: Amount Due: .

UC Employer Account Number:

Federal EIN:

Period Covered: to
MM DD YYYY MM DD YYYY

Amount Remitted: .

Contact Person

Telephone Number

MAKE CHECK PAYABLE TO TREASURER, STATE OF MAINE

**DO NOT STAPLE OR TAPE CHECK TO YOUR FORM. DO NOT CUT FORM.
DO NOT SEND PHOTOCOPIES OF FORMS.**

THIS FORM IS NOT REQUIRED IF PAYMENT WAS MADE ELECTRONICALLY.