NEW YORK STATE
DEPARTMENT OF LABOR

UNEMPLOYMENT INSURANCE
DIVISION

NOTICE TO EMPLOYEES

EMPLOYER REGISTRATION NUMBER

1-78 ER# 04-63705 3

EASTERN SUFFOLK BOCES
201 SUNRISE HWY
PATCHOGUE NY 11772

EMPLOYEES OF THIS FIRM ARE COVERED BY THE NEW YORK STATE UNEMPLOYMENT INSURANCE LAW:

NO DEDUCTIONS FROM WAGES MAY BE MADE FOR THIS PURPOSE.

IF YOU ARE LAID OFF, WORK LESS THAN FOUR DAYS A WEEK, OR RESIGN, GET A "RECORD OF EMPLOYMENT" FORM FROM YOUR EMPLOYER. KEEP THIS FORM.

RECORD OF EMPLOYMENT FORMS REQUIRED BY REGULATION WILL CONTAIN YOUR EMPLOYER'S NAME, REGISTRATION NUMBER AND ADDRESS WHERE PAYROLL RECORDS ARE KEPT.

IF YOU WISH TO FILE AN APPLICATION FOR UNEMPLOYMENT INSURANCE

GO TO YOUR NEAREST UNEMPLOYMENT INSURANCE OFFICE OR COMMUNITY SERVICE CENTER, REGISTER FOR WORK AND FILE FOR BENEFITS.

TAKE YOUR SOCIAL SECURITY ACCOUNT CARD AND YOUR "RECORD OF EMPLOYMENT" FORM WITH YOU.

John E Sweeney

JOHN E. SWEENEY
COMMISSIONER OF LABOR

Thomas L. Malone

THOMAS L. MALONE, DIRECTOR
UNEMPLOYMENT INSURANCE DIVISION

EMPLOYER: POST CONSPICUOUSLY IN EACH WORKPLACE. FOR ADDITIONAL POSTERS WRITE TO: N.Y.S. DEPARTMENT OF LABOR
LIABILITY AND DETERMINATION SECTION