

INSTRUCTIONS FOR BENEFIT AUDIT

PURPOSE

The benefit audit process is a joint effort by employers and the Employment Development Department (EDD) to protect the integrity of the Unemployment Insurance (UI) Fund and to detect potential fraud. You previously provided the EDD with earnings data regarding this employee on the *Quarterly Contribution Return and Report of Wages* (DE 9C). However, at this time the EDD needs more detailed information for the weeks indicated on the Benefit Audit. The Benefit Audit does not mean the employee acted improperly. With the cooperation of the employer community, the benefit audit process leads to the successful detection of benefit overpayments and the reversal of related charges to the employer's reserve or reimbursable account.

INFORMATION

Requirements: Please return **ALL** completed benefit audits within 10 days of receipt (unless the person had **NO** earnings for **ALL** the weeks listed on the audit) or obtain approval for an extension as required by Section 1085-4, Title 22 of the California Code of Regulations. It is a violation of Section 2106 of the California Unemployment Insurance Code to willfully neglect to provide this information.

Employer Liability: This Benefit Audit does not mean that a claim has been filed that affects your account. Your response does not entitle you to a determination or ruling.

Assistance: If you have questions or need assistance completing the Benefit Audit, visit the EDD website at www.edd.ca.gov or call the Centralized Overpayment Establishment Group at **1-866-401-2849**.

Address: Return completed benefit audits to: **EDD, PO Box 3038, Sacramento, CA 95812-3038**.

Please refer to the reverse side of this sheet for **Specific Instructions** on completing the Benefit Audit form.

COMMONLY ASKED QUESTIONS AND ANSWERS

Q: The person listed on the Benefit Audit never worked for me. What should I do?

A: Verify the Social Security number with your payroll records and report your findings on the audit.

Q: What if the employee's Social Security number is the same, but the name is different?

A: Please enter your employee's name in the space provided in item 4 and complete the audit.

Q: What if my work week is different from the Benefit Audit's benefit week?

A: In order to perform a valid audit it is necessary to match earnings for work performed to the benefit weeks listed. Please use records showing dates worked (such as time cards) to adjust or calculate earnings.

Q: What if the employee works on a seasonal or as needed basis?

A: Accurately report earnings (or no earnings) for the weeks listed on the audit. In item 3, provide any additional dates (laid off, recalled, or separation) related to the audit time period.


Q: What if the person did not have any earnings for **ALL** of the weeks listed on the Benefit Audit?

A: If the individual had **NO** earnings for **ALL** weeks listed on the Benefit Audit, please do not return the form to the EDD and keep it for your records. If the individual had earnings for **one or more of the weeks** listed, complete items 1 through 5 and return it to the EDD.

SPECIFIC INSTRUCTIONS

Check your records for the actual dates that the employee worked. If the individual had **NO** earnings for **ALL** weeks listed on the Benefit Audit, please do not return the form to the EDD and keep it for your records. If the individual had earnings for **one or more of the weeks** listed, complete items 1 through 5.

- ① Report gross earnings for the seven day work weeks indicated on the audit. Please note that earnings must be reported based on the **week when worked or earned, not when paid**.
- ② For each week with gross earnings, circle the earnings type or types that apply. Please refer to the earning type definitions in item 2 and see the example shown below.
- ③ Provide the first day and last day the employee actually worked. Provide additional information if relevant to the audit period.
- ④ This space allows you to report differences in name or Social Security number. Please complete the audit even if the name or Social Security number is different.
- ⑤ The information you provide in item 5 allows us to contact you if necessary.



EDD Employment
Development
Department
State of California

BENEFIT AUDIT

Por favor llamar al 1-866-401-2849
si necesita instrucciones en Español.

REPLY IS REQUIRED BY LAW TO REPORT EARNINGS

If this INDIVIDUAL WORKED or had earnings, complete items 1 through 5. For regular earnings, report when actually worked.

If EARNINGS ARE ZERO for ALL the weeks listed, **DO NOT RETURN THIS FORM.**

See enclosed instructions for step-by-step assistance. For additional clarification, call 1-866-401-2849.

Social Security Number (SSN): _____

Employee Name: _____

① ②

Week Begins	Week Ends	1. Gross Earnings	2. Circle Earnings Type Below	3. Provide the following information:
mm/dd/yy	mm/dd/yy		RE V H S R C P O	RE=Regular Earnings (includes overtime) V=Vacation Pay R=Residuals H=Holiday Pay C=Commissions S=Severance Pay P=Piece Work O=Other (indicate type) _____
mm/dd/yy	mm/dd/yy		RE V H S R C P O	3. Provide the following information: Actual First Day Worked: _____ Still Employed <input type="checkbox"/> or Actual Last Day Worked: _____ Additional dates (i.e., laid off, returned to work) and/or reason for separation: _____
mm/dd/yy	mm/dd/yy		RE V H S R C P O	4. Compare the name and SSN shown above with your records. Enter any differences below: SSN: _____ Name: _____ Please complete the audit even if name or SSN is different.
mm/dd/yy	mm/dd/yy		RE V H S R C P O	5. I hereby certify that the information provided is true and correct to the best of my knowledge. SIGNED: _____ Title: _____ Date: _____ Phone Number: _____ Person (if other than above) to be contacted for additional information: Name: _____ Phone Number: _____

Please return **ALL** completed benefit audits within 10 days of receipt to:
EMPLOYMENT DEVELOPMENT DEPARTMENT (EDD)
 PO BOX 3038
 SACRAMENTO, CA 95812-3038