SAMPLE, this page for reference only.

EDD Call Center
PO Box
CITY CA ZIP CODE



Mail Date: 00/00/0000

For Office Use Only: 000000000

EDD Phone Numbers:

English 1-800-300-5616 Spanish 1-800-326-8937 Cantonese 1-800-547-3506 Mandarin 1-866-303-0706 Vietnamese 1-800-547-2058 TTY (nonvoice) 1-800-815-9387 website: www.edd.ca.gov

CLAIMANT'S NAME CLAIMANT'S ADDRESS CITY CA ZIP CODE

NOTICE OF UNEMPLOYMENT INSURANCE AWARD

This Notice is <u>not</u> a final decision on whether you are eligible to receive Unemployment Insurance (UI) benefits. Review this Notice carefully to ensure your employer and wage information in the table below are accurate. Refer to the back of this Notice for information regarding the several reasons why wages may not be showing in the table below and for additional instructions, including what you should do if you disagree with any of the information in this table or if you think information is missing from the table.

 1. Claim Beginning Date:
 00/00/0000
 2. Claim Ending Date:
 00/00/0000

 3. Maximum Benefit Amount:
 \$0000
 4. Weekly Benefit Amount:
 \$000

 5. Total Wages:
 00,000.00
 6. Highest Quarter Earnings:
 0,000.00

- 7. This item does not apply to your claim. For more information, see item 7 on the reverse.
- **8. You must look for full time work each week.** For more information, refer to the handbook, *A Guide to Benefits and Employment Services*, DE 1275A, available online at www.edd.ca.gov/forms/.
- 9. This item does not apply to your claim.
- **10.** This Claim Award is calculated based on the (Standard or Alternate) Base Period.

11. Employee Name:	12. Employee Wages for the Quarter Ending:				13. Employer Name:
	Month/Year	Month/Year	Month/Year	Month/Year	
Claimant's Name	0,000	0,000	0,000	0,000	ABC CO
14. TOTALS:	0,000	0,000	0,000	0,000	

YOUR EMPLOYEE WAGES MAY SHOW "\$0" AND/OR AN EMPLOYER MAY BE MISSING FROM THE TABLE ON THE OTHER SIDE OF THIS NOTICE IF:

- Your identity needs to be verified by the EDD. In this case, the EDD will send you a Request for Identity Verification, and you must follow the instructions on that form in order to proceed with your claim.
- Your earnings were reported under an incorrect SSN. In this case, please contact the EDD. (See instructions below.)
- You worked for a federal agency and wages are being verified. In this case, the EDD will mail you an Amended Notice of Award once the wages are verified or contact you by mail if additional information is needed from you.
- Your employer failed to report your earnings. For example, this could be the case if your employer called you an independent contractor and issued you a 1099 tax form. In this case, please contact the EDD. (See instructions below.)

IF YOU DISAGREE WITH INFORMATION IN THE TABLE ON THE OTHER SIDE OF THIS NOTICE, including:

- Your wages are missing or incorrect.
- An employer is not listed, or an employer is listed for which you did not work (and you were not a federal employee).

THEN YOU MUST CONTACT THE EDD by mailing a letter to the EDD mailing address on the other side of this Notice within 30 calendar days of the "Mail Date" printed at the top of this Notice. If you do not contact the EDD within 30 days, you may miss your opportunity to inform the EDD that your claim should be investigated to determine whether your award should be changed to a different amount. The EDD may extend this 30 day period for good cause.

PLEASE PROVIDE:

- Your full name, address, and Social Security number, and
- Proof of wages (including a W-2 or 1099, pay stubs, cash receipts or other documents showing your earnings) and any
 employment information you want to add to your claim, or
- If you did not work for an employer in the table, a statement that you did not work for a listed employer.

IMPORTANT: If you fail to notify the EDD of any inaccurate employment or wage information on the other side of this Notice, you may be subject to an overpayment, and other disqualifications and penalties if you intentionally withhold information.

THE FOLLOWING IS ADDITIONAL INFORMATION FOR EACH ITEM LISTED ON THE OTHER SIDE OF THIS NOTICE:

- 1. The date your claim begins.
- 2. The date your claim ends.
- 3. The total amount of money you can receive from this claim.
- 4. The maximum amount you can be paid each week, if you meet the weekly eligibility requirements.
- 5. The total amount of earnings reported by the employer(s) during the quarters listed in the table for item 12. These earnings were used to compute your maximum benefit amount.
- 6. The calendar quarter listed in the table for item 12 with the highest amount of earnings. These earnings determine your weekly benefit amount.
- 7. The amount listed, if applicable, is your award without the wages earned from a public or nonprofit school. If you worked for a public or nonprofit school during any of the quarters listed in the table for item 12, you may not be able to use those wages in your claim during a school recess period.
- 8. Under the law, you must make all reasonable efforts to find work when claiming benefits.
- 9. The Unemployment Insurance Code (Section 1277) requires that you work between the beginning and the ending dates of a prior claim to have a valid claim the next year. If this applies to your claim you will receive additional instructions.
- 10. The type of base period used to establish your claim; it will be either the Standard Base Period or the Alternate Base Period.
- 11. The name used by your employer(s) to report your earnings to the EDD during each calendar quarter listed.
- 12. These are the potentially usable wages for UI purposes that your employer(s) reported you earned during each calendar quarter listed. Each calendar quarter spans a three-month period. These earnings determine the amount of your benefits award.
- 13. The name(s) of the employer(s) you worked for during the calendar quarters listed in the table for item 12.
- 14. The total amount of earnings reported by all employer(s) in each calendar quarter listed in the table for item 12.

YOU ARE RESPONSIBLE for knowing the content of the *Unemployment Insurance Benefits: What You Need To Know* (DE 1275B), AND the content of the handbook, *A Guide To Benefits And Employment Services*, (DE 1275A). Both publications explain your unemployment rights and responsibilities and are available at edd.ca.gov/forms/.

To receive UI Benefits, you must certify for benefits initially and then every two weeks using one of the following methods: UI OnlineSM, EDD Tele-CertSM, or submit a paper *Continued Claim Form*, (DE 4581). For more information on certifying for benefits, refer to the DE 1275 handbook available at edd.ca.gov/forms/.

HOW TO CANCEL A UI CLAIM

You have the option of canceling your claim after receiving this Notice. If you want to cancel your claim, you need to contact the EDD right away. Do not certify for UI benefits. The law only allows you to cancel a UI claim if no benefits have been paid, no notice of disqualification has been mailed to you, no overpayment has been established on the claim, and the benefit year of your claim has not ended. If the claim is cancelled, it cannot be reopened.

DE 429Z Rev. 10 (12-20) (INTERNET) Page 2 of 2