

4/2025

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PA Form UC-2, Rev 9-2000, Employer's Report for Unemployment Compensation

Read Instructions - Answer Each Item FILED ELECTRONICALLY

DUE DATE

3331938^R

1/2025

INV. EXAMINED BY:

1. TOTAL COVERED EMPLOYEES IN PAY PERIOD INCL. 12TH OF MONTH

1ST MONTH

2ND MONTH

3RD MONTH

10

10

1552

8

Signature certifies that the information contained herein is true and correct to the best of the signer's knowledge.

ADP/ W. Gunn

10. SIGN HERE-DO NOT PRINT

TITLE ATTY-IN-FACT DATE 04-30-25 PHONE #

11. FILED PAPER UC-2A MAGNETIC MEDIA UC-2A

EMPLOYERS CONTRIBUTION RATE

.065514

EMPLOYER'S ACCT. NO

75-41523

CHECK DIGIT

REF 005/LB/BXF/

CPS P LLC 5755 NORTHWEST 84TH AVE DORAL FL 33166

2. GROSS WAGES

4,310.584

3. EMPLOYEE CONTRIBUTIONS

203.48

4. TAXABLE WAGES FOR EMPLOYER CONTRIBUTIONS

45,219.00

5. EMPLOYER CONTRIBUTIONS DUE (RATE X ITEM 4)

2975.97

6. TOTAL CONTRIBUTIONS DUE (ITEMS 3+5)

3010.84

7. INTEREST DUE SEE INSTRUCTIONS

219.00

8. PENALTY DUE SEE INSTRUCTIONS

9. TOTAL REMITTANCE (ITEMS 6+7+8)

\$ 3010.84

FOR DEPT. USE

MAKE CHECKS PAYABLE TO: PA UC FUND

DATE PAYMENT RECEIVED

SUBJECTIVITY DATE

REPORT DELINQUENT DATE