



**List of Employees to be Transferred**



**Print or type in blue or black ink.**

Successor Name:	UT Account No.:
Predecessor Name:	UT Account No.:
Contact Name:	Telephone No.:

Form UCS-1SA should list employees, who work or have worked for the transferred unit(s) from the date the unit was first reported by the predecessor(s) through the date of acquisition. The list must be in social security number sequential order and include employees' names. The *Employer's Annual Federal Unemployment (FUTA) Tax Return* (Form 940) and *Employer's Quarterly Report Form* (UCT-6) cannot be used in lieu of Form UCS-1SA.

If transferring more than ten employees, this information must be submitted electronically. For more information call 800-352-3671 Monday through Friday, 8 a.m. through 7 p.m., ET.

**List of Employees to be Transferred to the Successor**

	Social Security Number	Employee's Name (print or type last name first)
1	- -	
2	- -	
3	- -	
4	- -	
5	- -	
6	- -	
7	- -	
8	- -	
9	- -	
10	- -	

<p>Please attach this form to your UCS-1S and Mail to: Account Management Florida Department of Revenue P.O. Box 6510 Tallahassee, FL 32314-6510</p>	<p>Social security numbers (SSNs) are used by the Florida Department of Revenue as unique identifiers for the administration of Florida's taxes. SSNs obtained for tax administration purposes are confidential under sections 213.053 and 119.071, Florida Statutes, and not subject to disclosure as public records. Collection of your SSN is authorized under state and federal law. Visit our Internet site at <a href="http://www.myflorida.com/dor">www.myflorida.com/dor</a> and select "Privacy Notice" for more information regarding the state and federal law governing the collection, use, or release of SSNs, including authorized exceptions.</p>
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