



THE COMMONWEALTH OF MASSACHUSETTS  
EXECUTIVE OFFICE OF LABOR AND WORKFORCE DEVELOPMENT  
DEPARTMENT OF UNEMPLOYMENT ASSISTANCE



412507699

BREZANOVA, ANDREA  
74 Somerset Rd  
Nantucket, MA 02554-2735

CLAIMANT ID: 1543770

CLAIM ID: 202201  
January 18, 2023

### REQUEST FOR WAGE INFORMATION

You have recently applied for unemployment benefits and reported that you received wages during the time stated below. You must provide the proof listed under instructions.

Provide information for the following time period: 10/1/2022 - 12/3/2022

**Instructions:**

1. In the blank space below, write the correct wage amount you were paid for the dates indicated, from every employer in Massachusetts and other states.
2. Include with this form *copies* of check stubs with pay dates no later 12/3/2022. Keep the originals because documents you submit will *not* be returned to you.  
If you cannot document some or all of your wages, you may submit an affidavit (a written statement signed under the penalties of perjury) telling us about the employer, your job, the dates you worked, and how much you were paid in each calendar quarter for that work. (We also are asking for wage information for each of these quarters from those of your former employers whom we know about.)
- 3.
4. Sign and date the form and any affidavit.
5. Mail this form, including required documentation (proof of wages as stated above) to the address below:  
Department of Unemployment Assistance  
P.O. Box 9511  
Boston, MA 02114

**Alternate Base Period Employment for BREZANOVA, ANDREA**

	10/1/2022 - 12/3/2022
UI Gross Wages	

**You must respond to this request by 1/30/2023 or payment on your claim may be affected.**

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_