



OKLAHOMA
Employment Security Commission

PO Box 52003
Oklahoma City, Oklahoma 73152-2003

APPLICATION FOR VOLUNTARY ELECTION

1 Business name of employing unit:

2 Address from which reports will be made:
(Number and Street)

City _____ County _____ State _____ Zip Code _____

3 Type of ownership: (Check) Individual Partnership Corporation Trust
Estate LLC Other (specify): _____

4 If a corporation, LLC or trust, enter name of individual or officer authorized to bind the company by contract:

5 Date of first payroll?

6A. The undersigned hereby voluntarily elects to become an "Employer" pursuant to the provisions of 40 O.S. Section 3-203(A), effective the first date in the calendar quarter the election is approved.

6B. The undersigned hereby voluntarily elects to cover employees exempt under Section 1-210 of the Oklahoma Employment Security Act.

7. _____ 8. By: _____
(Signature of officer named in Item 4) (Must be signed by member of the firm)

Attest _____ Title: _____ Date: _____
(Secretary)

If a corporation,
imprint corporate
Seal here.

Approved by the Commission on _____

By: _____
(Supervisor of Status Determination)

EQUAL OPPORTUNITY EMPLOYER/PROGRAM
AUXILIARY AIDS AND SERVICES ARE AVAILABLE
UPON REQUEST TO INDIVIDUALS WITH DISABILITIES