



John Bel Edwards
Governor

Ava Cates
Secretary

OFFICE OF UNEMPLOYMENT INSURANCE

NO EMPLOYEES AFFIDAVIT (NEVER HAD AN ACCOUNT NUMBER)

The below information is required by The LA Workforce Commission in order to issue the Certificate of Clearance.

Company Name: _____

Federal Identification Number: _____

STATE OF _____

PARISH (COUNTY) OF _____

_____, being first duly sworn upon his oath, deposes and says as follows:
(Name)

1. Affiant is the _____, of _____,
(Title) (Company)

2. Said Company, _____,
(Company withdrawing/dissolving)

a company organized & existing under the laws of the State of _____, **Has Never Had Employees in the State of Louisiana.**

Signature: _____

Title: _____

Phone: _____

Fax: _____

Date: _____

NOTARIZATION IS BEING WAIVED DURING COVID PANDEMIC

Sworn to and subscribed before me this _____ day of _____, 20 ____

Notary Public

Form ES 278—Request Info on Clearance (R/08/2021)



OFFICE OF UNEMPLOYMENT INSURANCE

NO EMPLOYEES SINCE AFFIDAVIT (HAD AN ACCOUNT NUMBER)

The below information is required by The LA Workforce Commission in order to issue the Certificate of Clearance.

Company Name: _____

1. Louisiana Unemployment Insurance (UI) Tax Number: _____
2. Federal Identification Number: _____
3. Last date of employment in Louisiana: _____
4. Charter number: _____
5. If business sold to another Louisiana business, name of business sold to:

STATE OF _____

PARISH (COUNTY) OF _____

_____, being first duly sworn upon his oath, deposes and says as follows:
(Name)

1. Affiant is the _____, of _____,
(Title) (Company)

2. Said Company _____,
(Company withdrawing/dissolving)

a company organized & existing under the laws of the State of _____, Has Not Had
Employees in the State of Louisiana since _____.

Signature: _____

Title: _____

Phone: _____

Date: _____

NOTARIZATION IS BEING WAIVED DURING COVID PANDEMIC

Sworn to and subscribed before me this _____ day of _____, 20 ____

Notary Public