

Instructions for Amended Status Report (Form C-1AM)

Purpose of Report: This report is used to update your account information with the Texas Workforce Commission.

Please complete items 1 thru 8, and any other items that need to be updated, and sign the report in item 14 on the back of the form.

Identification Section

1. Account Number assigned by TWC: Enter the TWC account number (00-000000-0) as it appears on the Employer's Quarterly Report (Item #1, TWC Form C-3).
2. Name: Enter the Employer's Name as it appears on the Employer's Quarterly Report (TWC Form C-3).
3. Mailing Address: Enter the Employer's current mailing address as it appears on the Employer's Quarterly Report (TWC Form C-3).
4. City, State, ZIP: Enter the City, State and ZIP Code (00000-0000) for the employer address as it appears on the Employer's Quarterly Report (TWC Form C-3).
5. Federal Employer I.D. Number: Enter the Employer's Federal I.D. (74-0000000) Number, issued by the IRS.
6. Area Code/Phone Number: Enter the Employer Phone number, including Area Code.
7. Address of Records/Payroll: Enter the address where the employer keeps the payroll records, if different than the address in #3.
8. City, State, Zip: Enter the city, state and zip code (00000-0000) for the address in item #7, as necessary.
9. Owners or Officers Name, Soc. Sec. No., Title, Residence Address, City, State: Enter the name, ssn, title, and residence address for each owner, officer, or partner of the business. Use additional pages as needed.
10. Business Location(s) in Texas: Enter the trade name (DBA), street address, city, kind of business and number of employees, for each business location in the state of Texas.

Acquisition Section

If you have ACQUIRED (PURCHASED) the business in Texas of a previous owner, complete this section, to include.

Date of Acquisition: (mm/dd/yr)

Previous owner's TWC Account Number (00-000000-0) if known.

Previous owner's name.

Previous owner's address.

City, State, ZIP (00000-0000)

Indicate the portion of the business acquired (purchased). Check either ALL or PART. If checking part, please specify what part of business was purchased.

Reopen Section

If you are filing this report to RE-ACTIVATE (REOPEN) your Inactive Account. Please complete this section to include:

The date you resumed employing someone in Texas (MM/DD/YY)

The date you resumed paying wages in Texas (MM/DD/YY)

continued on page 2

Suspend Section

If you are filing this report to INACTIVATE (CLOSE) your account, complete the following section to include:

The last day on which anyone performed services in Texas (MM/DD/YY)

The date on which final wages were paid (MM/DD/YY)

Please check ONE of the following, if employment in Texas was discontinued because of:

1. Business discontinued entirely without a successor.
2. Business continued without employment.
3. Business, trade, or organization was acquired by a successor.

If you checked item #3, enter the following information about the successor.

Successor's TWC Account Number (00-000000-0) if known.

Successor's Name

Successor's Address.

City, State, ZIP (00000-0000).

Successor Acquired: Indicate the portion of the business acquired (purchased). Check either ALL the Texas business or assets or PART of the Texas business or assets. If checking part, please specify what part of business was acquired.

Signature Section

The form MUST BE signed by an owner, officer, partner, or individual with Written Authorization for the business. Please indicate the date signed and the title of the individual whose signature appears on this form.

KEEP A COPY OF THIS REPORT FOR YOUR FILE.