

# Determination of Employer Forfeitures

The Department is required by Chapter 108 of the Wisconsin Statutes to investigate employer acts that aid and abet claimant concealment.

UI Account No:

Wisconsin Statutes Section 108.04(11)(c)
---

---

## FINDINGS AND DETERMINATION OF DEPUTY:

### EFFECTS:

#### THE EMPLOYING UNIT AIDED AND ABETTED THE CLAIMANT(S) IN COMMITTING AN ACT OR ACTS OF CONCEALMENT.

The employing unit is required to pay the Department of Workforce Development \$\_\_\_\_\_, the amount of improperly paid benefits to the claimant(s), plus a forfeiture/penalty, in the amount of \$\_\_\_\_\_ for aiding and abetting in one or more acts of concealment.

Benefits were improperly paid because the employer aided and abetted the claimant(s) in receipt of unemployment benefits not due. Pursuant to section 108.04(13)(f), the employer is at fault.

Benefits improperly paid from other employer's UI reserve accounts will now be charged to \_\_\_\_\_, Acct. # \_\_\_\_\_

Benefits improperly paid from your UI reserve account will remain charged even if the claimant repays the department.

Pursuant to section 108.04(13)(e), the employer's UI reserve account will not be credited with the amount of the overpaid benefits, even if the department receives repayment.

(SEE LAST PAGE FOR APPEAL INSTRUCTIONS)

DEPUTY NAME	DATE MAILED	DECISION FINAL UNLESS A WRITTEN APPEAL RECEIVED OR POSTMARKED BY:

**Note: Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m), Wisconsin Statutes].**

Statute 108.04(11)

- (c) Any employing unit that aids and abets a claimant in committing or attempts to aid and abet a claimant in committing an act of concealment described in par. (a) or (b) may, by a determination issued under s. 108.10, be required, as to each act of concealment the employing unit aids and abets or attempts to aid and abet, to forfeit an amount equal to the amount of the benefits the claimant improperly received as a result of the concealment.
- (d) In addition to other remedies, the department may, by civil action, recover any benefits obtained by means of false statements or representation or any administrative assessment imposed under par. (cm). Chapter 778 does not apply to the collection of any benefits or assessment under this paragraph.

#### HOW TO FILE AN APPEAL

**IF YOU DISAGREE WITH THIS DETERMINATION, AN APPEAL MAY BE FILED. If you receive more than one determination that you disagree with you must file an appeal to each.** An appeal is a request for a hearing before an Administrative Law Judge, and must be in writing and clearly state that it is an appeal of the determination(s) of the deputy; and should:

- Be signed by you, your agent or attorney; and
- Include a copy of the determination(s).
- Include your name and business name and unemployment employer account number.
- Include dates and time when you, your agent, attorney or witness(es) are not available for a hearing as postponements cannot always be granted. The hearing office will try to accommodate your request.
- Indicate any special needs, i.e., accommodations needed as a result of a disability or a hearing office – supplied interpreter (language or sign).

An appeal **must** be postmarked or received by the last appeal date shown on the front of this determination. An appeal **by FAX must include the above information and must be received by midnight (Central Time) on the last appeal date.**

An appeal mailed after the last appeal date should explain the reasons for your late appeal. A late appeal, if not for reasons beyond your control, **will** result in a dismissal of your appeal and **the determination will remain in effect.**

#### WHERE TO FILE AN APPEAL

**Send only appeals** to this address:

**BOLA  
P.O. Box 8942  
Madison, WI 53708  
FAX (608) 266-8221**

#### **IMMEDIATELY START PREPARING FOR A HEARING**

- Gather the relevant documents, evidence and witness(es) you need to present at the hearing.
- If an attorney or agent will represent you, immediately contact the hearing office with that person's name, address and dates(s) of unavailability.
- Upon receipt of an appeal, all parties involved in the hearing will be sent a NOTICE OF RECEIPT OF APPEAL (UCL-400) as well as information on hearing procedures. **READ ALL INFORMATION CAREFULLY.**

#### PAYMENT INFORMATION FOR THE EMPLOYING UNIT

- Make the check or money order payable to DWD and send with one copy of this determination to:

**DWD – UI Collections  
P.O. Box 7945  
Madison, WI 53707**

- DWD will begin legal action against any employing unit that fails to pay, or make arrangements to pay, the amounts specified on this determination within 30 days.
- Legal collection action will be delayed pending appeal results.