

I Have Payments To Report

Please Note: List only those payees that PTA pays directly for services. Do NOT list payees when monies are donated to a school district to pay workers.

Payee 1

List the name of the person or company that you directly paid.

Name Of Payee - 1

(Individual or Organization)

Type of Work

List the type of work they did. Try to reference a specific project.

Be Specific

Dates Worked

If the job was ongoing, you can list all the dates here.

(Jan 5, 2020-Jan 4, 2021)

Does The Payee Carry Their Own Workers Comp Insurance

Please Select One

* If "yes", the payee must provide a Certificate of Insurance from their Workers' Compensation insurance carrier to your PTA. The Certificate must list limits in the Workers' Compensation section and be attached to this report form. Please note, General Liability insurance is NOT Workers' Compensation insurance

Amount Paid For Services - P1

Total amount you paid for all work done by this person or company.

\$

Do you have more Payees

You have the option here of entering more payees or completing the form.



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Once you have completed the online form:

You will receive an email with a copy of your Workers Compensation Annual Payroll Report. It will give you detailed instructions of what comes next:

- 1) No one paid: Print a copy of the form and place in the Treasurer's files
Upload the form to myPTEZ for the current fiscal year
- 2) You paid people: Print a copy of the form and place in the Treasurer's files
Upload the form to myPTEZ for the current fiscal year
Make payment to AIM Insurance for surcharge you owe, if any.