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Annual Payroll Form

Calendar Years 2015 and 2016

Account Name:	Account Number:
Address:	Due Date: February 29, 2016

Worker Payroll Information (This section must be completed)

Industry Code And Description	2015 Estimated Payroll	2015 Rate	2015 Actual Payroll (Payroll to a maximum of \$121,000 per worker)	2016 Rate	2016 Estimated Payroll (Payroll to a maximum of \$125,000 per worker)

Number of Volunteers

Industry Code And Description	2015 Estimated Number of Volunteers	2015 Fee	2015 Actual Number of Volunteers	2016 Fee	2016 Estimated Number Of Volunteers

2015 Worker Statistical Information

Industry Code And Description	Gross Payroll	Total Hours Worked For All Workers

Account Closure (If you no longer employ workers and do not plan to employ workers this year, please select one of the following. If you operate a seasonal business that will re-open this year, do not complete this section.)

<input type="checkbox"/> Business sold Date of sale: _____ (dd/mm/yyyy) Name, address and phone number of purchaser: _____ _____ _____	<input type="checkbox"/> Business closed Date you last employed workers: (dd/mm/yyyy) _____	<input type="checkbox"/> Business still operating but no longer employing workers or subcontractors Date you last employed workers: (dd/mm/yyyy) _____
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Contact Information:

Name: _____ **Phone:** _____ **Cell:** _____ **Fax:** _____
Position: _____ **e-mail:** _____

I hereby certify that the information on this form is true and correct.

Date	Authorized Signature	Name (Please Print)

When faxing this form, do not use a cover page and do not mail the original.