

ARIZONA DEPARTMENT OF ECONOMIC SECURITY
Unemployment Insurance Program

COMBINED-WAGE CLAIM WITHDRAWAL

CLAIMANT INFORMATION

NAME _____ SOCIAL SECURITY NUMBER _____
(Please print or type)

ADDRESS (No., Street) _____

CITY _____ STATE _____ ZIP CODE _____ PHONE NUMBER _____

I want to withdraw my combined-wage claim against Arizona and intend to file an individual claim against the State of _____

I have not received any unemployment insurance benefits as a result of my Arizona combined-wage claim.

I have received unemployment insurance benefits from my Arizona combined-wage claim. To repay the overpayment created by withdrawing my claim,

I am immediately repaying the State of Arizona (attach check or money order) in the amount of

\$ _____

I authorized the State of _____ to deduct an amount sufficient to repay this

overpayment of \$ _____ and to forward these benefits to the State of Arizona.

CLAIMANT'S SIGNATURE _____ DATE _____

Subscribed and sworn before me this _____ day of _____ 20 _____

DEPUTY'S SIGNATURE

(Authorized representative to administer oaths and affirmations pursuant to Arizona Revised Statutes § 23-675)

Equal Opportunity Employer/Program • Under Titles VI and VII of the Civil Rights Act of 1964 (Title VI & VII), and the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Title II of the Genetic Information Nondiscrimination Act (GINA) of 2008; the Department prohibits discrimination in admissions, programs, services, activities, or employment based on race, color, religion, sex, national origin, age, disability, genetics and retaliation. The Department must make a reasonable accommodation to allow a person with a disability to take part in a program, service, or activity. Auxiliary aids and services are available upon request to individuals with disabilities. To request this document in alternative format or for further information about this policy, contact your local office; TTY/TDD Services: 7-1-1. • Free language assistance for DES services is available upon request. • Disponible en español en línea o en la oficina local.