

# Form 132 Domestic Oregon Employee Detail Report



6524010123

## Include with Form OA

You must complete this form if you have employees and pay Unemployment Insurance (UI) tax (or reimburse the Employment Department for unemployment benefits) or withhold State Income Taxes or Paid Leave. If you fail to report all employees with correct and accurate information, including correct Social Security numbers, you may be charged penalties (ORS 657.571 and 657B.920).

Do not submit photocopies.

Date received

Business name

Federal employer identification number (FEIN)

Business identification number (BIN)

Quarter/Year (Q/YY)

 / 

Total UI subject wages (must equal Form OA, 8a).

1.	1a. Social Security number (SSN) <input type="text"/>	1b. Employee first initial and last name <input type="text"/>	1c. Whole hours worked <input type="text"/>
	1d. State income tax withholding <input type="text"/>	1e. UI subject wages <input type="text"/>	1f. Paid Leave subject wages <input type="text"/>
2.	2a. Social Security number (SSN) <input type="text"/>	2b. Employee first initial and last name <input type="text"/>	2c. Whole hours worked <input type="text"/>
	2d. State income tax withholding <input type="text"/>	2e. UI subject wages <input type="text"/>	2f. Paid Leave subject wages <input type="text"/>
3.	3a. Social Security number (SSN) <input type="text"/>	3b. Employee first initial and last name <input type="text"/>	3c. Whole hours worked <input type="text"/>
	3d. State income tax withholding <input type="text"/>	3e. UI subject wages <input type="text"/>	3f. Paid Leave subject wages <input type="text"/>
4.	4a. Social Security number (SSN) <input type="text"/>	4b. Employee first initial and last name <input type="text"/>	4c. Whole hours worked <input type="text"/>
	4d. State income tax withholding <input type="text"/>	4e. UI subject wages <input type="text"/>	4f. Paid Leave subject wages <input type="text"/>
5.	5a. Social Security number (SSN) <input type="text"/>	5b. Employee first initial and last name <input type="text"/>	5c. Whole hours worked <input type="text"/>
	5d. State income tax withholding <input type="text"/>	5e. UI subject wages <input type="text"/>	5f. Paid Leave subject wages <input type="text"/>
6.	6a. Social Security number (SSN) <input type="text"/>	6b. Employee first initial and last name <input type="text"/>	6c. Whole hours worked <input type="text"/>
	6d. State income tax withholding <input type="text"/>	6e. UI subject wages <input type="text"/>	6f. Paid Leave subject wages <input type="text"/>

Continue to next page →

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Business identification number (BIN)  -  Quarter/Year (Q/YY)  /

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7.	7a. Social Security number (SSN) <input type="text"/>	7b. Employee first initial and last name <input type="text"/>	7c. Whole hours worked <input type="text"/>
	7d. State income tax withholding <input type="text"/>	7e. UI subject wages <input type="text"/>	7f. Paid Leave subject wages <input type="text"/>
8.	8a. Social Security number (SSN) <input type="text"/>	8b. Employee first initial and last name <input type="text"/>	8c. Whole hours worked <input type="text"/>
	8d. State income tax withholding <input type="text"/>	8e. UI subject wages <input type="text"/>	8f. Paid Leave subject wages <input type="text"/>
9.	9a. Social Security number (SSN) <input type="text"/>	9b. Employee first initial and last name <input type="text"/>	9c. Whole hours worked <input type="text"/>
	9d. State income tax withholding <input type="text"/>	9e. UI subject wages <input type="text"/>	9f. Paid Leave subject wages <input type="text"/>
10.	10a. Social Security number (SSN) <input type="text"/>	10b. Employee first initial and last name <input type="text"/>	10c. Whole hours worked <input type="text"/>
	10d. State income tax withholding <input type="text"/>	10e. UI subject wages <input type="text"/>	10f. Paid Leave subject wages <input type="text"/>
11.	11a. Social Security number (SSN) <input type="text"/>	11b. Employee first initial and last name <input type="text"/>	11c. Whole hours worked <input type="text"/>
	11d. State income tax withholding <input type="text"/>	11e. UI subject wages <input type="text"/>	11f. Paid Leave subject wages <input type="text"/>
12.	12a. Social Security number (SSN) <input type="text"/>	12b. Employee first initial and last name <input type="text"/>	12c. Whole hours worked <input type="text"/>
	12d. State income tax withholding <input type="text"/>	12e. UI subject wages <input type="text"/>	12f. Paid Leave subject wages <input type="text"/>
13.	13a. Social Security number (SSN) <input type="text"/>	13b. Employee first initial and last name <input type="text"/>	13c. Whole hours worked <input type="text"/>
	13d. State income tax withholding <input type="text"/>	13e. UI subject wages <input type="text"/>	13f. Paid Leave subject wages <input type="text"/>
14.	14a. Social Security number (SSN) <input type="text"/>	14b. Employee first initial and last name <input type="text"/>	14c. Whole hours worked <input type="text"/>
	14d. State income tax withholding <input type="text"/>	14e. UI subject wages <input type="text"/>	14f. Paid Leave subject wages <input type="text"/>

**Column totals.** Total boxes C, D, E, and F from both pages.

**C. Total whole hours worked**

**D. Total state income tax withholding**

**E. Total UI subject wages**

**F. Total Paid Leave subject wages**