

Youmans & Gardner, CPAs
Georgia Employer Partial Claim Reporting Client Worksheet

Client/employer: _____

Weekly payroll period end date: _____

Any employee, whether full-time or part-time who

1. has had their hours reduced due to a partial or total shutdown related to the COVID-19 virus in the most recent weekly payroll period and
 2. earned \$665 or less in the most recent weekly payroll period
- must be included in a partial claim filing with the Georgia Department of Labor.

If you would like us to file your partial claim on your behalf you must complete this worksheet weekly and forward it to our office within four days after the end of your most recent weekly payroll period.

Employee's Name	Employees' Current Address	Telephone number	Date of birth	Race	Physically Handicapped?	U.S. Citizen?	Hours worked	Amount Earned	Y&G Use
			/ /		Y/N	Y/N		\$	
			/ /		Y/N	Y/N		\$	
			/ /		Y/N	Y/N		\$	
			/ /		Y/N	Y/N		\$	
			/ /		Y/N	Y/N		\$	
			/ /		Y/N	Y/N		\$	
			/ /		Y/N	Y/N		\$	
			/ /		Y/N	Y/N		\$	