

Employer's Reciprocal Coverage Election Supplemental Attachment

R. 01/13 Rule 73B-10.037 Florida Administrative Code Effective Date 11/14

RTS-6A



This form must be attached to each copy of the Employer's Reciprocal Coverage Election (RTS-6).

State	% Of Servi	ce	State	% Of Service	
The employees listed be	elow are hereby inclu	ded in Item 2 of the	election to which t	his sheet is attached:	
Employee's Name	Social Security Number	- 1		Basis for Election in Florida a) Does some work in Florida b) Residence in Florida c) Related to a place of business in Florida	
Date			n – Name of Emplo		

Social security numbers (SSNs) are used by the Florida Department of Revenue as unique identifiers for the administration of Florida's taxes. SSNs obtained for tax administration purposes are confidential under sections 213.053 and 119.071, Florida Statutes, and not subject to disclosure as public records. Collection of your SSN is authorized under state and federal law. Visit our Internet site at www.floridarevenue.com and select "Privacy Notice" for more information regarding the state and federal law governing the collection, use, or release of SSNs, including authorized exceptions.