



MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS  
**TRANSFERRED CONSUMER REGISTRATION**  
**(Consumers Previously with Another Vendor)**

421 East Dunklin Street  
P.O. Box 59  
Jefferson City, MO 65104-0059  
573-751-1995  
www.labor.mo.gov/DES

This form can be submitted to the Division via email at [CDSTAX@labor.mo.gov](mailto:CDSTAX@labor.mo.gov). For questions please call 573-751-1995.

Vendor	Vendor FEIN
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CONSUMER				
SUTA NO.	*FEDERAL TAX ID	*SOCIAL SECURITY NO.	*1ST DATE PAID WAGES	*PREVIOUS VENDOR

CONSUMER				
SUTA NO.	*FEDERAL TAX ID	*SOCIAL SECURITY NO.	*1ST DATE PAID WAGES	*PREVIOUS VENDOR

CONSUMER				
SUTA NO.	*FEDERAL TAX ID	*SOCIAL SECURITY NO.	*1ST DATE PAID WAGES	*PREVIOUS VENDOR

CONSUMER				
SUTA NO.	*FEDERAL TAX ID	*SOCIAL SECURITY NO.	*1ST DATE PAID WAGES	*PREVIOUS VENDOR

\* Required Information

If you have served on active duty in the Armed Forces of the United States and would like information about veterans' services and benefits, please complete the survey here: [mvc.dps.mo.gov/MoVeteransInformation/Survey/DOLIR](http://mvc.dps.mo.gov/MoVeteransInformation/Survey/DOLIR).  
**IMPORTANT:** If needed, call 573-751-1995 for assistance in the translation and understanding of the information in this document.  
**¡IMPORTANTE!** Si es necesario, llame al 573-751-1995 para asistencia en la traducción y entendimiento de la información en este documento.

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