Unemployment Insurance
Minnesota

Financial Loss Application

Complete this form and mail it with a copy of the documentation showing the amount of the financial loss claimed as described on the Web site to:

MN Department of Employment and Economic Development
Attn: Legal Affairs
1st National Bank Building
332 Minnesota St., Suite E200
St. Paul, MN 55101-1351

Complete **all information** required on this form.

1. Name: _____
   first middle initial last
2. Address: _____

   _____
   city, state, and zip code
3. Telephone #: _____
4. The dates that unemployment benefits were delayed:

   _____ _____ (estimate if necessary)
   start end
5. List type of financial loss you are claiming (Example – bank overdraft charges).

   _____

   _____

   _____
6. Attach documentation that shows your financial loss. (Example – your bank statements, etc.)
7. Amount of financial loss the documentation shows: $_____.

   _____
   signature