## Job Loss or Failure to Hire

The purpose of this supplemental hardship questionnaire is to provide you with the opportunity to submit a claim for payment from the Hardship Impact Pool because you experienced a job loss or failure to hire to which the UIA's wrongful fraud determination and collection activity was a contributing factor. To potentially receive a payment based on experiencing adverse employment consequences, please provide the following information.

## Preliminary Information

Date of UIA's
wrongful fraud
determination: $\qquad$

Date of UIA
wrongful
collection
activity: $\qquad$

## Specific Information

Question \#1: Were you employed at the time of the UIA's wrongful fraud determination and collection activity? If YES, please provide (a) the name of the employer and (b) explain the effect that the UIA's activity had on your employment. If NO, proceed to Question \#2.

Response: (a)
(b)
$\qquad$

Question \#2: $\quad$ Did the UIA interfere with your ability to secure employment?

Response:

Question \#3: Please explain how or whether the UIA's wrongful fraud determination and collection activity affected your ability to (re)acquire gainful employment.

Response:

## Additional Information

Please provide a brief explanation of how the UIA's wrongful fraud determination and collection activity was a contributing factor to your employment status.

Please provide a brief explanation of any other factors related to the effect of the UIA collection on your employability.

I certify under penalty of perjury under the laws of the United States and Michigan that the foregoing is true and accurate.

Claimant Signature: $\qquad$

