EMPLOYER'S QUARTERLY EARNED INCOME TAX RETURN

Heidelberg/Lynn Earned Income Tax Bureau
6272 Route 309
New Tripoli, PA 18066-2030
610-767-6220 Fax 610-767-6988

Total Income Tax Withheld ________________

Penalty/Interest ________________

Late Filing Fee ________________

Total Tax Paid This Quarter ________________

QUARTER

Employer's Code

Employer's Name & Address

I declare, under the penalties or purjury, that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return, made in good faith, pursuant to the Income Tax Resolution and the regulations issued under authority thereof.

Signed ________________________________

Title ________________________________
(Owner, president, partner, member, etc.)

Date ________________________________

If paid by check or money order, make payable to:
HEIDELBERG/LYNN EIT

SOC. SEC. #	NAME & ADDRESS	MUNICIPALITY	WAGES	TAX W/H

Due dates. Reports and payment are due for each quarter as follows:

Quarter covering	Jan, Feb, March	April, May, June	July, Aug, Sep	Oct, Nov, Dec
Due on or before	April 30	July 31	October 31	January 31

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