

Ebensburg Boro and Central Cambria School District

Payable to: **EBENSBURG BOROUGH, Tax Collector** – 300 W. High St., P.O. Box 205, Ebensburg, PA 15931

EMPLOYERS QUARTERLY RETURN OF EARNED INCOME TAX WITHHELD

TAX YEAR _____

EIN _____

PAGE NO. _____

Employer's Name..... Address.....	Period Covered By This Return		Due Date
		1st Qtr. – Jan. - Feb. Mar.	Apr. 30,
		2nd Qtr – Apr. - May - June	July 30,
		3rd Qtr. – July - Aug. - Sept.	Oct. 30,
		4th Qtr. – Oct. - Nov. - Dec.	Jan. 30,

COMPUTE TAX HERE	TAX AT 1%	I Certify that the information contained in this return is true, correct and complete to the best of my knowledge and belief. Signed..... Title..... Date.....
No. of Taxable Employees		
TAXABLE WAGES PAID		
TAX WITHHELD ON ABOVE WAGES		
Penalty 1/2% Per Mo. or Fraction & Int. 1/2% Per Mo.		
COLUMN TOTALS		
TOTAL REMITTED		

WAGE TAX WITHHELD FOR QUARTER

Social Security No.	EMPLOYEE'S NAME	ADDRESS	Taxable Wages	Tax Withheld
TOTALS FOR QUARTER -			\$	\$