EMPLOYER NUMBER	R EMPLOYER NAME			FEDERAL EIN #		PSD
PAYMENT MONTH	DUE AND PAYABLE BY	QUARTER	TAX YEAR			
			200	09		
1. TOTAL EARNED INCOME TAX (EIT) WITHHELD				1.		
2. PENALTY – ADD 1/2 OF 1% OF LINE 1 FOR EACH MONTH TAX REMAINS UNPAID (APPLIED TO QUARTERLY PAYMENT ONLY)				2.		
3. INTEREST – ADD 6% PER ANNUM OF LINE 1 FOR EACH DAY (.00017 X # OF DAYS) TAX REMAINS UNPAID (APPLIED TO QUARTERLY PAYMENTS ONLY) 3.				3.	garthaulthaulthaulthaulthaulthaulthaulthaul	
4. TOTAL AMOUNT TO BE REMITTED WITH THIS RETURN. (ADD LINES 1, 2, 3) 4.						
CHANGE OF ADDRESS:		PAYABLE TO: "WESTAB	MAKE CHECK OR MONEY ORDER PAYABLE TO: "WESTAB EIT" PLEASE USE SEPARATE CHECKS		MAIL TO: (USE BLUE LABELS) EMPLOYER DEPARTMENT P.O. BOX 656 CAMP HILL, PA 17001-0656	
I DECLARE UNDER PENALTIES PROVIDED BY THE LAW THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE IS A TRUE, CORRECT AND COMPLETE RETURN.			SIGNATURE	E AND TITLE		DATE SIGNED