EMPLOYER NUMBER	EMPLOYER NAME			FEDERAL EIN #		
DUE AND PAYABLE BY		QUARTER	TAX	YEAR		
			20	09		
1. TOTAL LOCAL SERVICES TAX (LST) WITHHELD				1.		
<ol> <li>PENALTY - ADD 10% OF LINE 1 FOR EACH QTR. TAX REMAINS UNPAID (APPLIED TO QUARTERLY PAYMENT ONLY)</li> </ol>				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)						
4. TOTAL AMOUNT TO BE REMITTED WITH THIS RETURN. (ADD LINES 1, 2, 3)				4.		
CHANGE OF ADDRESS:		PAYABLE TO: "WESTA	MAKE CHECK OR MONEY ORDER PAYABLE TO: "WESTAB LST" PLEASE USE SEPARATE CHECKS		MAIL TO: (USE YELLOW LABELS) EMPLOYER DEPARTMENT P.O. BOX 656 CAMP HILL, PA 17001-0656	
I DECLARE UNDER PENALTIES PROVID OF MY KNOWLEDGE IS A TRUE, COR	DED BY THE LAW THAT THIS RETURN HAS BEEN EXAMINED BY ME AN RECT AND COMPLETE RETURN.	D TO THE BEST				
WESTAB FORM LST-1 - PAYMENT FORM (Rev. 12-07)		***************************************	SIGNATURE AND TITLE			DATE SIGNED