Employers Withholding Tax		NOTICE: : This form must be returned	ed whether or not you had emplo	wees during this guarter
1. Number of taxable employees 2. Total salaries, wages, commissions and other compensation paid 3. Less compensation paid for services outside of this taxable area 4. Taxable earnings (item 2 minus item 3) 5. Actual tax due in quarter at 0.50% 6. Adjustments (prior quarter) 7. Interest (1% per month) after due date 8. Penalty (5% per month. Not to exceed 25%) 9. Total taxes due including interest penalty		Notify Occupational License Fee Tax Administrator of any change in ownership or name and address shown on this form.	City of Lancaster Offic	r Payroll Tax
	N	If no wages were paid this quarter, mark "None" and return this form with explanation.  Make Check	Account:  Due:  Period  End:	
		Payable To: City of Lancaste  Mail To: City of Lancaste  Payroll Tax Adm  308 West Maple  Lancaster	r Payroll Tax Office inistrator	40444
Signed	Title		Date	BLADE