

LST-1

LOCAL SERVICES TAX EMPLOYER RETURN

TAXING JURISDICTION:

Payable to: HAB-LST
BERKHEIMER
PO BOX 906, BANGOR PA 18013-0906

Number of Exemptions Enclosed

Visit our Website at: www.hab-inc.com
ACCOUNT NO.



- 1. Number of Employees Reported (enter "0" if none)
- 2. Total amount of tax withheld this quarter.....
- 3. Discount (x line 2)
- 4. Net amount due (line 2 minus line 3)
- 5. Penalty (line 4 x of tax) after due date.....
- 6. Interest (line 4 x of tax per month) after due date
- 7. Total penalty & interest (line 5 + line 6)
- 8. TOTAL AMOUNT DUE (line 4 + line 7)

\$	
	\$
	\$
\$	
\$	
	\$
	\$

THIS FORM MUST BE FILED AND RETURNED EACH QUARTER