

# J.P. HARRIS ASSOCIATES LLC

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*Municipal and School Tax Accounts*

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Local Services Tax **Quarterly** Employer Return or  
Employee Return in Alphabetical Order by **County**

**LOCAL SERVICES TAX FOR ALLEGHENY TOWNSHIP, CAMBRIA COUNTY, PA  
QUARTERLY RETURN**

**MAIL & MAKE PAYABLE TO: J P HARRIS ASSOCIATES LLC, P O BOX 226, MECHANICSBURG, PA 17055**

**ALL EMPLOYERS: MUST SEND EMPLOYEES' NAMES, SOCIAL SECURITY NUMBERS & AMOUNTS WITHHELD**

**MUST REPLY EACH QUARTER**

**DUE DATE ON OR BEFORE**

COUNTY \_\_\_\_\_ TWP OR BORO \_\_\_\_\_ TAX YEAR \_\_\_\_\_  
 SCHOOL DISTRICT \_\_\_\_\_ QUARTER \_\_\_\_\_  
 EMP ID \_\_\_\_\_ COMPANY, EMPLOYEE OR TAXPAYER NAME & ADDRESS \_\_\_\_\_ FED EIN# OR SS# \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_

**CIRCLE ONE:**      EMPLOYER      SELF-EMPLOYED      TAXPAYER WITH NO LST WITHHELD

	DOLLARS	CENTS
1. TOTAL NUMBER OF EMPLOYEES OR FORMS REPORTED		
2. LST - DEDUCT \$10 FROM EACH EMPLOYEE. \$10 X'S NUMBER OF EMPLOYEES	\$	
3. EMPLOYER'S COLLECTION FEE (LINE 2 X 2% (.02) IF FILED BY DUE DATE ONLY	\$	
4. NET AMOUNT DUE-ENCLOSED (LINE 2 MINUS LINE 3)	\$	
5. PENALTY 5% (.05)	\$	
6. INTEREST - 1/2% (.005) FOR EACH MONTH	\$	
7. TOTAL - INCLUDING ANY PENALTY AND INTEREST DUE	\$	
8. DATE PAID TO J P HARRIS ASSOCIATES -		

**MAIL THIS FORM AND PAYMENT TO:**  
 J P HARRIS ASSOCIATES LLC  
 LOCAL SERVICES TAX DEPT  
 P O BOX 226  
 MECHANICSBURG PA 17055  
 PHONE: 1-866-766-0226 FAX: (717)766-8039

I DECLARE UNDER PENALTIES PROVIDED BY LAW THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE IS A TRUE, CORRECT AND COMPLETE RETURN.

SIGNATURE _____	TITLE _____	DATE _____
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**"COLLECTOR" FOR LOCAL SERVICES TAX**  
**J P HARRIS ASSOCIATES LLC**  
 P O BOX 226  
 MECHANICSBURG PA 17055

YOU ARE ENTITLED TO RECEIVE A WRITTEN EXPLANATION OF YOUR RIGHTS WITH REGARD TO THE ASSESSMENT, AUDIT, APPEAL, ENFORCEMENT, REFUND, & COLLECTION OF CERTAIN LOCAL TAXES. THE WRITTEN EXPLANATION IS ENTITLED J P HARRIS BILL OF RIGHTS DISCLOSURE STATEMENT. IF YOU WANT A COPY, MAIL US A REQUEST AT THE ADDRESS ON THIS RETURN.

**LOCAL SERVICES TAX FOR ASHVILLE BORO, CAMBRIA COUNTY, PA  
QUARTERLY RETURN**

**MAIL & MAKE PAYABLE TO: J P HARRIS ASSOCIATES LLC, P O BOX 226, MECHANICSBURG, PA 17055**

**ALL EMPLOYERS: MUST SEND EMPLOYEE NAMES, SOCIAL SECURITY NUMBERS & AMOUNTS WITHHELD**

MUST REPLY EACH QUARTER

DUE DATE ON OR BEFORE

COUNTY CAMBRIA

TWP OR BORO ASHVILLE BORO

TAX YEAR

SCHOOL DISTRICT PENN CAMBRIA SCHOOL DISTRICT

QUARTER

EMP ID COMPANY, EMPLOYEE OR TAXPAYER NAME & ADDRESS

FED EIN# OR SS#

FROM  
TO

CIRCLE ONE: EMPLOYER SELF-EMPLOYED TAXPAYER WITH NO LST WITHHELD

	DOLLARS	CENTS
1. TOTAL NUMBER OF EMPLOYEES OR FORMS REPORTED		
2. LST - DEDUCT \$10 FROM EACH EMPLOYEE. \$10 X'S NUMBER OF EMPLOYEES.	\$	
3. EMPLOYER'S COLLECTION FEE (LINE 2 X 2% (.02) IF FILED BY DUE DATE ONLY	\$	
4. NET AMOUNT DUE-ENCLOSED (LINE 2 MINUS LINE 3)	\$	
5. PENALTY - 1/2% (.005) FOR EACH MONTH	\$	
6. INTEREST - 1/2% (.005) FOR EACH MONTH	\$	
7. TOTAL - INCLUDING ANY PENALTY AND INTEREST DUE	\$	
8. DATE PAID TO J P HARRIS ASSOCIATES -		

**MAIL THIS FORM AND PAYMENT TO:**

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**LOCAL SERVICES TAX FOR BARR TOWNSHIP, CAMBRIA COUNTY, PA  
QUARTERLY RETURN**

**MAIL & MAKE PAYABLE TO: J P HARRIS ASSOCIATES LLC, P O BOX 226, MECHANICSBURG, PA 17055**

**ALL EMPLOYERS: MUST SEND EMPLOYEES' NAMES, SOCIAL SECURITY NUMBERS & AMOUNTS WITHHELD**

MUST REPLY EACH QUARTER

DUE DATE ON OR BEFORE \_\_\_\_\_

COUNTY CAMBRIA

TWP OR BORO BARR TOWNSHIP

TAX YEAR \_\_\_\_\_

SCHOOL DISTRICT NORTHERN CAMBRIA SCHOOL DIST

QUARTER \_\_\_\_\_

EMP ID COMPANY, EMPLOYEE OR TAXPAYER NAME & ADDRESS

FED EIN# OR SS#

FROM  
TO

CIRCLE ONE:      EMPLOYER      SELF-EMPLOYED      TAXPAYER WITH NO LST WITHHELD

	DOLLARS	CENTS
1. TOTAL NUMBER OF EMPLOYEES OR FORMS REPORTED		
2. LST - DEDUCT \$10 FROM EACH EMPLOYEE. \$10 X'S NUMBER OF EMPLOYEES.	\$	
3. EMPLOYER'S COLLECTION FEE (LINE 2 X 2% (.02) IF FILED BY DUE DATE ONLY	\$	
4. NET AMOUNT DUE-ENCLOSED (LINE 2 MINUS LINE 3)	\$	
5. PENALTY 5% (.05)	\$	
6. INTEREST - 1/2% (.005) FOR EACH MONTH	\$	
7. TOTAL - INCLUDING ANY PENALTY AND INTEREST DUE	\$	
8. DATE PAID TO J P HARRIS ASSOCIATES -		

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**LOCAL SERVICES TAX FOR DEAN TOWNSHIP, CAMBRIA COUNTY, PA  
QUARTERLY RETURN**

**MAIL & MAKE PAYABLE TO: J P HARRIS ASSOCIATES LLC, P O BOX 226, MECHANICSBURG, PA 17055**

**ALL EMPLOYERS: MUST SEND EMPLOYEES' NAMES, SOCIAL SECURITY NUMBERS & AMOUNTS WITHHELD**

**MUST REPLY EACH QUARTER**

**DUE DATE ON OR BEFORE**

COUNTY CAMBRIA

TWP OR BORO

DEAN TOWNSHIP

TAX YEAR

SCHOOL DISTRICT

QUARTER

EMP ID

COMPANY, EMPLOYEE OR TAXPAYER NAME & ADDRESS

FED EIN# OR SS#

FROM  
TO

**CIRCLE ONE:      EMPLOYER                  SELF-EMPLOYED                  TAXPAYER WITH NO LST WITHHELD**

		DOLLARS	CENTS
1.	TOTAL NUMBER OF EMPLOYEES OR FORMS REPORTED		
2.	LST - DEDUCT \$10 FROM EACH EMPLOYEE. \$10 X'S NUMBER OF EMPLOYEES.	\$	
3.	EMPLOYER'S COLLECTION FEE (LINE 2 X 2% (.02) IF FILED BY DUE DATE ONLY	\$	
4.	NET AMOUNT DUE-ENCLOSED (LINE 2 MINUS LINE 3)	\$	
5.	PENALTY 5% (.05)	\$	
6.	INTEREST - 1/2% (.005) FOR EACH MONTH	\$	
7.	TOTAL - INCLUDING ANY PENALTY AND INTEREST DUE	\$	
8.	DATE PAID TO J P HARRIS ASSOCIATES -		

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**LOCAL SERVICES TAX FOR GALLITZIN TOWNSHIP, CAMBRIA COUNTY, PA**

**QUARTERLY RETURN**

**MAIL & MAKE PAYABLE TO: J P HARRIS ASSOCIATES LLC, P O BOX 226, MECHANICSBURG, PA 17055**

**ALL EMPLOYERS: MUST SEND EMPLOYEE NAMES, SOCIAL SECURITY NUMBERS & AMOUNTS WITHHELD**

**MUST REPLY EACH QUARTER**

**DUE DATE ON OR BEFORE**

COUNTY CAMBRIA

TWP OR BORO

GALLITZIN TOWNSHIP

TAX YEAR

SCHOOL DISTRICT PENN CAMBRIA SCHOOL DISTRICT

QUARTER

EMP ID

COMPANY, EMPLOYEE OR TAXPAYER NAME & ADDRESS

FED EIN# OR SS#

FROM  
TO

**CIRCLE ONE:**

EMPLOYER

SELF-EMPLOYED

TAXPAYER WITH NO LST WITHHELD

	DOLLARS	CENTS
1. TOTAL NUMBER OF EMPLOYEES OR FORMS REPORTED		
2 LST - DEDUCT \$10 FROM EACH EMPLOYEE. \$10 X'S NUMBER OF EMPLOYEES.	\$	
3. EMPLOYER'S COLLECTION FEE (LINE 2 X 2% (.02) IF FILED BY DUE DATE ONLY	\$	
4. NET AMOUNT DUE-ENCLOSED (LINE 2 MINUS LINE 3)	\$	
5. PENALTY - 1/2% (.005) FOR EACH MONTH	\$	
6. INTEREST - 1/2% (.005) FOR EACH MONTH	\$	
7. TOTAL - INCLUDING ANY PENALTY AND INTEREST DUE	\$	
8. DATE PAID TO J P HARRIS ASSOCIATES -		

**MAIL THIS FORM AND PAYMENT TO:**

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LOCAL SERVICES TAX DEPT  
P O BOX 226  
MECHANICSBURG PA 17055  
PHONE: 1-866-766-0226 FAX: (717)766-8039

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P O BOX 226  
MECHANICSBURG PA 17055

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**LOCAL SERVICES TAX FOR LILLY BOROUGH, CAMBRIA COUNTY, PA  
QUARTERLY RETURN**

**MAIL & MAKE PAYABLE TO: J P HARRIS ASSOCIATES LLC, P O BOX 226, MECHANICSBURG, PA 17055**

**ALL EMPLOYERS: MUST SEND EMPLOYEE NAMES, SOCIAL SECURITY NUMBERS & AMOUNTS WITHHELD**

MUST REPLY EACH QUARTER

DUE DATE ON OR BEFORE \_\_\_\_\_

COUNTY CAMBRIA

TWP OR BORO LILLY

TAX YEAR \_\_\_\_\_

SCHOOL DISTRICT PENN CAMBRIA SCHOOL DISTRICT

QUARTER \_\_\_\_\_

EMP ID \_\_\_\_\_

COMPANY, EMPLOYEE OR TAXPAYER NAME & ADDRESS \_\_\_\_\_

FED EIN# OR SS# \_\_\_\_\_

FROM  
TO \_\_\_\_\_

**CIRCLE ONE:**      EMPLOYER      SELF-EMPLOYED      TAXPAYER WITH NO LST WITHHELD

	DOLLARS	CENTS
1. TOTAL NUMBER OF EMPLOYEES OR FORMS REPORTED		
2. LST - DEDUCT \$30 FOR EACH EMPLOYEE. \$30 X'S NUMBER OF EMPLOYEES.	\$	
3. EMPLOYER'S COLLECTION FEE (LINE 2 X 2% (.02) IF FILED BY DUE DATE ONLY	\$	
4. NET AMOUNT DUE-ENCLOSED (LINE 2 MINUS LINE 3)	\$	
5. PENALTY - 1/2% (.005) FOR EACH MONTH	\$	
6. INTEREST - 1/2% (.005) FOR EACH MONTH	\$	
7. TOTAL - INCLUDING ANY PENALTY AND INTEREST DUE	\$	
8. DATE PAID TO J P HARRIS ASSOCIATES -		

**MAIL THIS FORM AND PAYMENT TO:**

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MECHANICSBURG PA 17055  
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SIGNATURE _____	TITLE _____	DATE _____
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**"COLLECTOR" FOR LOCAL SERVICES TAX  
J P HARRIS ASSOCIATES LLC  
P O BOX 226  
MECHANICSBURG PA 17055**

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**LOCAL SERVICES TAX FOR LORETTO BOROUGH, CAMBRIA COUNTY, PA  
QUARTERLY RETURN**

**MAIL & MAKE PAYABLE TO: J P HARRIS ASSOCIATES LLC, P O BOX 226, MECHANICSBURG, PA 17055**

**ALL EMPLOYERS: MUST SEND EMPLOYEE NAMES, SOCIAL SECURITY NUMBERS & AMOUNTS WITHHELD**

**MUST REPLY EACH QUARTER**

**DUE DATE ON OR BEFORE**

COUNTY CAMBRIA

TWP OR BORO LORETTO

TAX YEAR

SCHOOL DISTRICT PENN CAMBRIA SCHOOL DISTRICT

QUARTER

EMP ID

COMPANY, EMPLOYEE OR TAXPAYER NAME & ADDRESS

FED EIN# OR SS#

FROM  
TO

**CIRCLE ONE:      EMPLOYER      SELF-EMPLOYED      TAXPAYER WITH NO LST WITHHELD**

	DOLLARS	CENTS
1. TOTAL NUMBER OF EMPLOYEES OR FORMS REPORTED		
2. LST - DEDUCT \$10 FROM EACH EMPLOYEE. \$10 X'S NUMBER OF EMPLOYEES.	\$	
3. EMPLOYER'S COLLECTION FEE (LINE 2 X 2% (.02) IF FILED BY DUE DATE ONLY	\$	
4. NET AMOUNT DUE-ENCLOSED (LINE 2 MINUS LINE 3)	\$	
5. PENALTY - 1/2% (.005) FOR EACH MONTH	\$	
6. INTEREST - 1/2% (.005) FOR EACH MONTH	\$	
7. TOTAL - INCLUDING ANY PENALTY AND INTEREST DUE	\$	
8. DATE PAID TO J P HARRIS ASSOCIATES -		

**MAIL THIS FORM AND PAYMENT TO:**

J P HARRIS ASSOCIATES LLC  
LOCAL SERVICES TAX DEPT  
P O BOX 226  
MECHANICSBURG PA 17055  
PHONE: 1-866-766-0226 FAX: (717)766-8039

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SIGNATURE

TITLE

DATE

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J P HARRIS ASSOCIATES LLC  
P O BOX 226  
MECHANICSBURG PA 17055**

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**LOCAL SERVICES TAX FOR MUNSTER TOWNSHIP, CAMBRIA COUNTY, PA  
QUARTERLY RETURN**

**MAIL & MAKE PAYABLE TO: J P HARRIS ASSOCIATES LLC, P O BOX 226, MECHANICSBURG, PA 17055**

**ALL EMPLOYERS: MUST SEND EMPLOYEE NAMES, SOCIAL SECURITY NUMBERS & AMOUNTS WITHHELD**

<b>MUST REPLY EACH QUARTER</b>		<b>DUE DATE ON OR BEFORE</b>	
COUNTY CAMBRIA	TWP OR BORO	MUNSTER TOWNSHIP	TAX YEAR
SCHOOL DISTRICT PENN CAMBRIA SCHOOL DISTRICT			QUARTER
EMP ID	COMPANY, EMPLOYEE OR TAXPAYER NAME & ADDRESS	FED EIN# OR SS#	FROM TO

**CIRCLE ONE:**      EMPLOYER      SELF-EMPLOYED      TAXPAYER WITH NO LST WITHHELD

	DOLLARS	CENTS
1. TOTAL NUMBER OF EMPLOYEES OR FORMS REPORTED		
2. LST - DEDUCT \$10 FROM EACH EMPLOYEE. \$10 X'S NUMBER OF EMPLOYEES.	\$	
3. EMPLOYER'S COLLECTION FEE (LINE 2 X 2% (.02) IF FILED BY DUE DATE ONLY	\$	
4. NET AMOUNT DUE-ENCLOSED (LINE 2 MINUS LINE 3)	\$	
5. PENALTY - 1/2% (.005) FOR EACH MONTH	\$	
6. INTEREST - 1/2% (.005) FOR EACH MONTH	\$	
7. TOTAL - INCLUDING ANY PENALTY AND INTEREST DUE	\$	
8. DATE PAID TO J P HARRIS ASSOCIATES -		

**MAIL THIS FORM AND PAYMENT TO:**

J P HARRIS ASSOCIATES LLC  
LOCAL SERVICES TAX DEPT  
P O BOX 226  
MECHANICSBURG PA 17055  
PHONE: 1-866-766-0226 FAX: (717)766-8039

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SIGNATURE	TITLE	DATE
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J P HARRIS ASSOCIATES LLC  
P O BOX 226  
MECHANICSBURG PA 17055**

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**LOCAL SERVICES TAX FOR NORTHERN CAMBRIA BOROUGH, CAMBRIA COUNTY, PA  
QUARTERLY RETURN**

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MUST REPLY EACH QUARTER

DUE DATE ON OR BEFORE

COUNTY CAMBRIA

TWP OR BORO NORTHERN CAMBRIA

TAX YEAR

SCHOOL DISTRICT NORTHERN CAMBRIA SCHOOL DIST

QUARTER

EMP ID COMPANY, EMPLOYEE OR TAXPAYER NAME & ADDRESS

FED EIN# OR SS#

FROM  
TO

CIRCLE ONE: EMPLOYER SELF-EMPLOYED TAXPAYER WITH NO LST WITHHELD

	DOLLARS	CENTS
1. TOTAL NUMBER OF EMPLOYEES OR FORMS REPORTED		
2. LST - DEDUCT \$52 FROM EACH EMPLOYEE. DIVIDE \$52 BY NUMBER OF PAYROLL PERIODS A YEAR.	\$	
3. EMPLOYER'S COLLECTION FEE (LINE 2 X 2% (.02) IF FILED BY DUE DATE ONLY	\$	
4. NET AMOUNT DUE-ENCLOSED (LINE 2 MINUS LINE 3)	\$	
5. PENALTY 5% (.05)	\$	
6. INTEREST - 1/2% (.005) FOR EACH MONTH	\$	
7. TOTAL - INCLUDING ANY PENALTY AND INTEREST DUE	\$	
8. DATE PAID TO J P HARRIS ASSOCIATES -		

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 MECHANICSBURG PA 17055  
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SIGNATURE	TITLE	DATE
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**LOCAL SERVICES TAX FOR SUSQUEHANNA TOWNSHIP, CAMBRIA COUNTY, PA  
 QUARTERLY RETURN**

**MAIL & MAKE PAYABLE TO: J P HARRIS ASSOCIATES LLC, P O BOX 226, MECHANICSBURG, PA 17055**

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MUST REPLY EACH QUARTER  
 COUNTY CAMBRIA  
 SCHOOL DISTRICT NORTHERN CAMBRIA SCHOOL DIST  
 EMP ID  
 DUE DATE ON OR BEFORE  
 TWP OR BORO SUSQUEHANNA  
 TAX YEAR  
 QUARTER  
 FROM TO  
 COMPANY, EMPLOYEE OR TAXPAYER NAME & ADDRESS  
 FED EIN# OR SS#

**CIRCLE ONE:** EMPLOYER      SELF-EMPLOYED      TAXPAYER WITH NO LST WITHHELD

	DOLLARS	CENTS
1. TOTAL NUMBER OF EMPLOYEES OR FORMS REPORTED		
2. LST- DEDUCT \$52 FROM EACH EMPLOYEE. DIVIDE \$52 BY NUMBER OF PAYROLL PERIODS A YEAR	\$	
3. EMPLOYER'S COLLECTION FEE (LINE 2 X 2% (.02) IF FILED BY DUE DATE ONLY	\$	
4. NET AMOUNT DUE-ENCLOSED (LINE 2 MINUS LINE 3)	\$	
5. PENALTY 5% (.05)	\$	
6. INTEREST - 1/2% (.005) FOR EACH MONTH	\$	
7. TOTAL - INCLUDING ANY PENALTY AND INTEREST DUE	\$	
8. DATE PAID TO J P HARRIS ASSOCIATES -		

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**LOCAL SERVICES TAX FOR TUNNELHILL BOROUGH, CAMBRIA COUNTY, PA  
QUARTERLY RETURN**

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**MUST REPLY EACH QUARTER**

**DUE DATE ON OR BEFORE**

COUNTY CAMBRIA

TWP OR BORO TUNNELHILL BOROUGH

TAX YEAR

SCHOOL DISTRICT PENN CAMBRIA SCHOOL DISTRICT

QUARTER

EMP ID COMPANY, EMPLOYEE OR TAXPAYER NAME & ADDRESS

FED EIN# OR SS#

FROM  
TO

**CIRCLE ONE:** EMPLOYER SELF-EMPLOYED TAXPAYER WITH NO LST WITHHELD

	DOLLARS	CENTS
1. TOTAL NUMBER OF EMPLOYEES OR FORMS REPORTED		
2 LST - DEDUCT \$10 FROM EACH EMPLOYEE. \$10 X'S NUMBER OF EMPLOYEES	\$	
3. EMPLOYER'S COLLECTION FEE (LINE 2 X 2% (.02) IF FILED BY DUE DATE ONLY	\$	
4. NET AMOUNT DUE-ENCLOSED (LINE 2 MINUS LINE 3)	\$	
5. PENALTY 5% (.05)	\$	
6. INTEREST - 1/2% (.005) FOR EACH MONTH	\$	
7. TOTAL - INCLUDING ANY PENALTY AND INTEREST DUE	\$	
8. DATE PAID TO J P HARRIS ASSOCIATES -		

**MAIL THIS FORM AND PAYMENT TO:**

J P HARRIS ASSOCIATES LLC  
LOCAL SERVICES TAX DEPT  
P O BOX 226  
MECHANICSBURG PA 17055  
PHONE: 1-866-766-0226 FAX: (717)766-8039

I DECLARE UNDER PENALTIES PROVIDED BY LAW THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE IS A TRUE, CORRECT AND COMPLETE RETURN.

SIGNATURE	TITLE	DATE
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**"COLLECTOR" FOR LOCAL SERVICES TAX  
J P HARRIS ASSOCIATES LLC  
P O BOX 226  
MECHANICSBURG PA 17055**

YOU ARE ENTITLED TO RECEIVE A WRITTEN EXPLANATION OF YOUR RIGHTS WITH REGARD TO THE ASSESSMENT, AUDIT, APPEAL, ENFORCEMENT, REFUND, & COLLECTION OF CERTAIN LOCAL TAXES. THE WRITTEN EXPLANATION IS ENTITLED J P HARRIS BILL OF RIGHTS DISCLOSURE STATEMENT. IF YOU WANT A COPY, MAIL US A REQUEST AT THE ADDRESS ON THIS RETURN.

**LOCAL SERVICES TAX FOR WASHINGTON TOWNSHIP, CAMBRIA COUNTY, PA  
QUARTERLY RETURN**

**MAIL & MAKE PAYABLE TO: J P HARRIS ASSOCIATES LLC, P O BOX 226, MECHANICSBURG, PA 17055**

**ALL EMPLOYERS: MUST SEND EMPLOYEES' NAMES, SOCIAL SECURITY NUMBERS & AMOUNTS WITHHELD**

**MUST REPLY EACH QUARTER**

**DUE DATE ON OR BEFORE**

COUNTY CAMBRIA

TWP OR BORO

TAX YEAR

SCHOOL DISTRICT PENN CAMBRIA SCHOOL DISTRICT

QUARTER

EMP ID

COMPANY, EMPLOYEE OR TAXPAYER NAME & ADDRESS

FED EIN# OR SS#

FROM  
TO

**CIRCLE ONE:      EMPLOYER                  SELF-EMPLOYED                  TAXPAYER WITH NO LST WITHHELD**

	DOLLARS	CENTS
1. TOTAL NUMBER OF EMPLOYEES OR FORMS REPORTED		
2. LST - DEDUCT \$10 FROM EACH EMPLOYEE. \$10 X'S NUMBER OF EMPLOYEES.	\$	
3. EMPLOYER'S COLLECTION FEE (LINE 2 X 2% (.02) IF FILED BY DUE DATE ONLY	\$	
4. NET AMOUNT DUE-ENCLOSED (LINE 2 MINUS LINE 3)	\$	
5. PENALTY 5% (.05)	\$	
6. INTEREST - 1/2% (.005) FOR EACH MONTH	\$	
7. TOTAL - INCLUDING ANY PENALTY AND INTEREST DUE	\$	
8. DATE PAID TO J P HARRIS ASSOCIATES -		

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SIGNATURE	TITLE	DATE
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**LOCAL SERVICES TAX FOR SUSQUEHANNA TOWNSHIP, DAUPHIN COUNTY, PA**  
**QUARTERLY RETURN**

**MAIL & MAKE PAYABLE TO: J P HARRIS ASSOCIATES LLC, P O BOX 226, MECHANICSBURG, PA 17055**

**ALL EMPLOYERS: MUST SEND EMPLOYEES' NAMES, SOCIAL SECURITY NUMBERS & AMOUNTS WITHHELD**

MUST REPLY EACH QUARTER		DUE DATE ON OR BEFORE		
COUNTY	DAUPHIN	TWP OR BORO	SUSQUEHANNA LST	TAX YEAR
SCHOOL DISTRICT	SUSQUEHANNA TWP LST			QUARTER
EMP ID	COMPANY, EMPLOYEE OR TAXPAYER NAME & ADDRESS	FED EIN# OR SS#		FROM
				TO

CIRCLE ONE:      EMPLOYER                  SELF-EMPLOYED                  TAXPAYER WITH NO LST WITHHELD

		DOLLARS	CENTS
1.	TOTAL NUMBER OF EMPLOYEES OR FORMS REPORTED FOR QUARTER		
2.	GROSS "LST" DEDUCT \$52.00 YEARLY. DIVIDE \$52 BY NUMBER OF PAYROLL PERIODS A YEAR.	\$	
3.	EMPLOYER'S COLLECTION FEE (LINE 2 X 2% (.02) IF FILED BY DUE DATE ONLY	\$	
4.	NET AMOUNT DUE-ENCLOSED (LINE 2 MINUS LINE 3)	\$	
5.	PENALTY 5% (.05)	\$	
6.	INTEREST - 1/2% (.005) FOR EACH MONTH	\$	
7.	TOTAL - INCLUDING ANY PENALTY AND INTEREST DUE	\$	
8.	DATE PAID TO J P HARRIS ASSOCIATES -		

**MAIL THIS FORM AND PAYMENT TO:**

J P HARRIS ASSOCIATES LLC  
 LOCAL SERVICES TAX DEPT  
 P O BOX 226  
 MECHANICSBURG PA 17055  
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