MAKE CHECK OR MONEY ORDER PAYABLE TO

SWRTB
Southwest Regional Tax Bureau
One Centennial Way
Scottdale, PA 15683-1792

EMPLOYERS YEARLY RECONCILIATION
LOCAL SERVICE TAX REPORT

FORM LST-12

Account #: _____ Tax Year: _____

LST Tax Rate: _____ Qtr: **5**

Tax District: _____

Employer Information:

Name: _____

Address: _____

City, State, Zip _____

Email Address: _____

Telephone Number: _____

FOR TAX OFFICE USE ONLY			
Tax Received:	$		
Interest:	$		
Penalty:	$		
Paid:	$		
Check		Cash	MO

EMPLOYER INFORMATION	
1. Total No. of Employees Reported	$
2. Tax Rate Per Employee Per Year	
3. $ Amount Due (Line 1 x Line 2)	$
4. Qtrly Pmts remitted for Year	$
5. Difference (Line 3 - Line 4)	$
6. Penalty (1% per month from due date)	$
7. Late Fee $5.00	$
8.Balance Due	$

Under penalties of perjury I declare that I examined this return including accompanying schedules and statements, and to the best of my knowledge and belief are true and correct.

Signature:

Date:	Phone:
Federal ID Number:	

OFFICE USE ONLY **PSD** _____ **SDPSD** _____ **PEN** _____

Office Hours : Monday Thru Friday 8 am to 4 pm (724) 887-5320 visit us at www.swrtb.org

EMPLOYEE S.S.#	EMPLOYEE NAME	EMPLOYEE S.S.#	EMPLOYEE NAME

RETURN THIS FORM WITH PAYMENTS

PLEASE INDICATE ANY NAME OR ADDRESS CHANGE