

RECONCILIATION OF TAYLORSVILLE OCCUPATIONAL LICENSE FEE WITHHELD

During Year Ended _____
To Be Filed By February 28 or With the Final
Quarterly Return Of The Closing of Any Business Either By Sale or Dissolution.

TYPE OR PRINT IN THIS SPACE EMPLOYER'S NAME
AND ADDRESS OF PRINCIPAL PLACE OF BUSINESS

1. Total number employees as listed hereon _____

2. Total City License Fee Withheld _____

Quarter Ended Mar. 31, _____

Quarter Ended June 30, _____

Quarter Ended Sept. 30, _____

Quarter Ended Dec. 31, _____

PERSON COMPLETING THIS FORM _____
PHONE NUMBER _____

TOTAL REMITTED FOR YEAR _____

Social Security Number	Name and Address of Employee	Gross Wages	% of Wages Subject to Fee	Wages Subject to Fee	Occupational License Withheld @ 0.75%
IF OTHER PAGES USED TOTAL THIS PAGE					
If report is completed on this page total here		\$		\$	\$