BOROUGH OF WEST VIEW

LOCAL SERVICES TAX
441 PERRY HIGHWAY
PITTSBURGH, PA 15229
(412) 931-1995
www.westviewborough.org

Due Date 04/30/2020

Quarter (1)
Tax Year 2020
Office Code LST-'

(1) Total Number of Taxables Reported _____
(2) Gross Tax Amount (52.00 Per Person) ** _____
(3) Penalty (5%) _____
(4) Interest (6%) _____
(5) Total Amount Paid _____

** (To be withheld at the rate of $1.00 per week.)

Employee Name	Address	Soc. Sec. No.	Amount

I Hereby Certify That This Return Has Been Examined By Me And The Information Herein Is True, Correct And Complete.

(6) Signature _____ Title _____ Date _____

Computer Reports Are Acceptable Of The Taxables, But Items Which Are Numbered (1 Thru 6) Must Be Completed And Returned To Our Office.

Please Make Check(s) Payable To: BOROUGH OF WEST VIEW

BOROUGH OF WEST VIEW

LOCAL SERVICES TAX
441 PERRY HIGHWAY
PITTSBURGH, PA 15229
(412) 931-1995
www.westviewborough.org

Due Date 07/31/2020

Quarter (2)
Tax Year 2020
Office Code LST-

(1) Total Number of Taxables Reported _____
(2) Gross Tax Amount (52.00 Per Person) ** _____
(3) Penalty (5%) _____
(4) Interest (6%) _____
(5) Total Amount Paid _____

** (To be withheld at the rate of $1.00 per week.)

Employee Name	Address	Soc. Sec. No.	Amount

I Hereby Certify That This Return Has Been Examined By Me And The Information Herein Is True, Correct And Complete.

(6) Signature _____ Title _____ Date _____

Computer Reports Are Acceptable Of The Taxables, But Items Which Are Numbered (1 Thru 6) Must Be Completed And Returned To Our Office.

Please Make Check(s) Payable To: BOROUGH OF WEST VIEW

BOROUGH OF WEST VIEW

LOCAL SERVICES TAX
441 PERRY HIGHWAY
PITTSBURGH, PA 15229
(412) 931-1995
www.westviewborough.org

Due Date 10/31/2020

Quarter (3)
Tax Year 2020
Office Code LST-

(1) Total Number of Taxables Reported _____
(2) Gross Tax Amount (52.00 Per Person) ** _____ ** (To be withheld at the rate of $1.00 per week.)
(3) Penalty (5%) _____
(4) Interest (6%) _____
(5) Total Amount Paid _____

Employee Name	Address	Soc. Sec. No.	Amount

I Hereby Certify That This Return Has Been Examined By Me And The Information Herein Is True, Correct And Complete.

(6) Signature _____ Title _____ Date _____

Computer Reports Are Acceptable Of The Taxables, But Items Which Are Numbered (1 Thru 6) Must Be Completed And Returned To Our Office.

Please Make Check(s) Payable To: BOROUGH OF WEST VIEW

BOROUGH OF WEST VIEW

LOCAL SERVICES TAX
441 PERRY HIGHWAY
PITTSBURGH, PA 15229
(412) 931-1995
www.westviewborough.org

Due Date 01/31/2021

Quarter (4)
Tax Year 2020
Office Code LST-

(1) Total Number of Taxables Reported _____
(2) Gross Tax Amount (52.00 Per Person) ** _____ ** (To be withheld at the rate of $1.00 per week.)
(3) Penalty (5%) _____
(4) Interest (6%) _____
(5) Total Amount Paid _____

Employee Name	Address	Soc. Sec. No.	Amount

I Hereby Certify That This Return Has Been Examined By Me And The Information Herein Is True, Correct And Complete.

(6) Signature _____ Title _____ Date _____

Computer Reports Are Acceptable Of The Taxables, But Items Which Are Numbered (1 Thru 6) Must Be Completed And Returned To Our Office.

Please Make Check(s) Payable To: BOROUGH OF WEST VIEW