

**ORIGINAL-EARNED INCOME TAX QUARTERLY REPORT**

**MAKE CHECK PAYABLE  
and RETURN TO**



102 RAHWAY ROAD  
McMURRAY, PA 15317-3349

OFFICE HOURS: 8:00 AM TO 4:30 PM  
MONDAY THROUGH FRIDAY

EMPLOYED BY: (Name and Address)

SOCIAL SEC. NO.

**FOR THE YEAR OF:**

ACCOUNT NUMBER:

SIGNATURE/TITLE

DATE

*THIS IS A TRUE AND COMPLETE STATEMENT.*

**THIS PAYMENT FOR QUARTER/S INDICATED [CHECK (✓) BOX]**

1.

Jan. 1 - Mar. 31  
**DUE APR. 30**

2.

Apr. 1 - Jun. 30  
**DUE JUL. 31**

3.

Jul. 1 - Sept. 30  
**DUE OCT. 31**

4.

Oct. 1 - Dec. 31  
**DUE JAN 31**

You may pay by **Credit Card** or **eCheck** at <http://www.jordantax.com/payments>  
**Use eCode CWA.** (A third-party processing fee will be charged for this service)

- 1. EARNED INCOME AND/OR NET PROFITS FOR PERIOD CHECKED: \$ \_\_\_\_\_
- 2. TAX DUE AT (MULTIPLY LINE 1 BY \_\_\_\_\_) \$ \_\_\_\_\_
- 3. CREDIT FOR OVERPAYMENT FROM PREVIOUS YEARS \$ \_\_\_\_\_
- 4. AMOUNT DUE WITH THIS RETURN (LINE 2 MINUS LINE 3) \$ \_\_\_\_\_

PROCESSED BY	DATE	CHECK OR M.O. NO.	CHECK	CASH	M.O.
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- FOR USE AFTER DUE DATE**
- 1. TAX DUE (FROM LINE 4 ABOVE) \$ \_\_\_\_\_
  - 2. PENALTY & INT. @ 1% PER MONTH \$ \_\_\_\_\_
  - 3. TOTAL AMOUNT PAID \$ \_\_\_\_\_

**INDICATE ANY CHANGES ON REVERSE SIDE.**