

CLGS 32-3 (1-19)

Name
Address
City
State
&
Zip



2021

2nd QUARTER Estimated Local Earned Income Tax

Due date: 07/15/2021

If you moved, enter the move date ____/____/____
 Check here if address change also applies to spouse
 Make corrections/additions to NAME, STREET, ADDRESS
 or RESIDENT MUNICIPALITY and check here

Resident PSD Code

Work Location PSD Code

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Resident Municipality _____

If you have no earned income, state the reason: retired / homemaker / student / disabled / temporarily unemployed /other (please specify): _____

Check here if ALL tax is withheld by employer(s)
 Do not complete information requested on Lines 1 through 6

1. Earned income and/or net profits (must enter amount) April 1 thru June 30 -----	.00
2. Tax rate of _____ multiplied by line 1 -----	.00
3. Employer withholding (April 1 thru June 30) -----	.00
4. TAX DUE (Line 2 minus Line 3)-----	.00
5. Penalty and interest: Line 4 multiplied by _____% per month (if paid after due date)-----	.00
6. TOTAL PAYMENT DUE (Line 4 plus Line 5)-----	.00

Payable to: **KEYSTONE COLLECTIONS GROUP**

SOCIAL SECURITY NUMBER

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DO NOT WRITE BELOW THIS LINE

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TRIM ALONG DOTTED LINE

CLGS 32-3 (1-19)

Name
Address
City
State
&
Zip



2021

3rd QUARTER Estimated Local Earned Income Tax

Due date: 10/15/2021

If you moved, enter the move date ____/____/____
 Check here if address change also applies to spouse
 Make corrections/additions to NAME, STREET, ADDRESS
 or RESIDENT MUNICIPALITY and check here

Resident PSD Code

Work Location PSD Code

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Resident Municipality _____

If you have no earned income, state the reason: retired / homemaker / student / disabled / temporarily unemployed /other (please specify): _____

Check here if ALL tax is withheld by employer(s)
 Do not complete information requested on Lines 1 through 6

1. Earned income and/or net profits (must enter amount) July 1 thru September 30 -----	.00
2. Tax rate of _____ multiplied by line 1 -----	.00
3. Employer withholding (July 1 thru September 30 only) --	.00
4. TAX DUE (Line 2 minus Line 3)-----	.00
5. Penalty and interest: Line 4 multiplied by _____% per month (if paid after due date)-----	.00
6. TOTAL PAYMENT DUE (Line 4 plus Line 5)-----	.00

Payable to: **KEYSTONE COLLECTIONS GROUP**

SOCIAL SECURITY NUMBER

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TRIM ALONG DOTTED LINE

CLGS 32-3 (1-19)

Name
Address
City
State
&
Zip



2021

4th QUARTER Estimated Local Earned Income Tax

Due date: 01/15/2022

If you moved, enter the move date ____/____/____
 Check here if address change also applies to spouse
 Make corrections/additions to NAME, STREET, ADDRESS
 or RESIDENT MUNICIPALITY and check here

Resident PSD Code

Work Location PSD Code

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Resident Municipality _____

If you have no earned income, state the reason: retired / homemaker / student / disabled / temporarily unemployed /other (please specify): _____

Check here if ALL tax is withheld by employer(s)
 Do not complete information requested on Lines 1 through 6

1. Earned income and/or net profits (must enter amount) October 1 thru December 31-----	.00
2. Tax rate of _____ multiplied by line 1 -----	.00
3. Employer withholding (October 1 thru December 31 only)	.00
4. TAX DUE (Line 2 minus Line 3)-----	.00
5. Penalty and interest: Line 4 multiplied by _____% per month (if paid after due date)-----	.00
6. TOTAL PAYMENT DUE (Line 4 plus Line 5)-----	.00

Payable to: **KEYSTONE COLLECTIONS GROUP**

SOCIAL SECURITY NUMBER

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