Reconciliation of Somerset Quarterly Tax Withheld

Business Name and Address

- 1. Total number employees as listed hereon _____
- 2. Total Somerset Tax withheld ______
 Quarter ended March 31 ______
 Quarter ended June 30 ______
 Quarter ended Sept. 30 ______
 Quarter ended Dec. 31 ______
 Total remitted for year \$______

During Year Ending _____

To Be Filed With the 4th Quarter's Return Or With the FINAL

Quarterly Return of the Closing of any Business Either by Sale or Dissolution.

Social Security Number	Name of Employee	Gross Wages Paid	Tax Withheld
If Report is Completed on this Page Total Here		\$	\$

Signature of responsible party _____