

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

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

Reference #:

Resident PSD:

Work Location PSD:

NAME  
ADDRESS

Check here if address change also applies to spouse

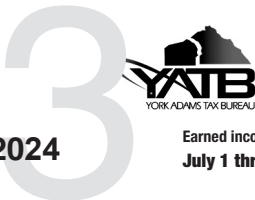
Check here to make corrections to Name, Street address or  
Resident Municipality.

If you moved enter the effective date: \_\_\_\_/\_\_\_\_/\_\_\_\_

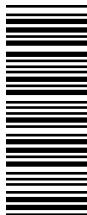
### 3rd QTR ESTIMATED Local Earned Income Tax

**ONLY ONE TAXPAYER PER VOUCHER**

2024



Earned income and/or net profits July 1 thru Sept 30 .....	1. \$	<input type="text"/>	.00
Multiply line 1 by your tax rate (see instructions) ...	2. \$	<input type="text"/>	.00
Employer Withheld July 1 thru Sept 30.....	3. \$	<input type="text"/>	.00
TAX DUE (line 2 minus line 3).....	4. \$	<input type="text"/>	.00
Penalty and interest: line 4 multiplied by 1% per month if paid after due date.....	5. \$	<input type="text"/>	.00
TOTAL PAYMENT DUE (add lines 4 & 5).....	6. \$	<input type="text"/>	.00



Social Security Number - no dashes

**Make check  
payable to:**

**York Adams Tax Bureau**

**DUE:  
Oct. 30th**