

Reconciliation of Eminence Occupational License Fee Withheld During Year Ending 20__

To Be Filed With the 4th Quarter's Return By January 31 of with the FINAL
Quarterly Return Of The Closing of Any Business Either By Sale of Dissolution

**TYPE OR PRINT IN THIS SPACE EMPLOYER'S NAME AND
ADDRESS OF PRINCIPAL PLACE OF BUSINESS**

1. Total number employees as listed hereon _____

2. Total Eminence License Fee Withheld _____

Quarter ended Mar. 31, _____

Quarter ended June 30, _____

Quarter ended Sept. 30, _____

Quarter ended Dec. 31, _____

Total remitted for year _____

Social Security #	Name and Address of Employee	Gross Wages Paid	Occupational License Withheld
IF OTHER PAGES USED TOTAL THIS PAGE		\$	\$
If report is completed on this page total here		\$	\$

Continuation

Employer's Name: _____

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