

Form LST - 1 Employer's Return - Calendar Year 2025

Payable to:

Watsonstown Borough
318 Main Street
P.O. Box 273
Watsonstown, PA 17777
570-538-1000

I declare under penalty of law that the information herein
 contained is true and correct

**Authorized
 Signature:**

Date filed:

Tax Levied by: Borough of Watsonstown		
Total number of employees reported herein (include owners and managers)		
Gross amount of tax-line 1 x \$	52.00	
Employer fee	2%	
Net Amount Due Line 2 minus 3		
Penalty	5%	
Interest	0.00% per month	
Total - including any penalty interest due		

Acct#:

For Quarter Ending:

Space below for
tax collector's use

Name & Address:

Due on or before:

12/31/2025

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