

9 Oct 1974

IMPORTANT: If tax is not withheld, file return marked "NONE"

FORM TC-96A

STATE OF UTAH EMPLOYER'S QUARTERLY INCOME TAX WITHHOLDING RETURN

I certify that this return and any accompanying schedules and statements, are to the best of my knowledge true, correct, complete and in accordance with the law and regulations applicable thereto.

H J Hall

SIGNATURE

Pres

TITLE

- 1. TOTAL AMOUNT WITHHELD THIS QUARTER \$ 20⁵²
- 2. LESS MONTHLY PAYMENTS:
 - DATE _____ AMOUNT \$ _____
 - DATE _____ AMOUNT \$ _____
 - TOTAL MONTHLY PAYMENTS _____

ACCOUNT NUMBER AND PERIOD
Q W57374 OCT-DEC 1973

EMPLOYER'S NAME AND ADDRESS OF PRINCIPAL PLACE OF BUSINESS
H TRACY HALL INC 1190 COLUMBIA LN PROVO UT 84601 MA BX 7533 UNIV STA PROVO UT 84602

- 3. ADJUSTMENTS \$ _____
- 4. BALANCE PD# 372
- 5. PENALTY _____
- 6. INTEREST _____
- 7. TOTAL . . . \$ 20⁵²

DO NOT FOLD
OR TEAR THIS CARD

MAKE CHECK OR MONEY ORDER
PAYABLE TO THE

STATE TAX COMMISSION OF UTAH

If preprinted information is incorrect, make any necessary changes

COPY