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IIC	T-7			_	7.	nterest due (see instruction	ıs)	+		⅃, ∟		┚╸	
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	Under penalties	of perjury, I declare that I have	read this return and t	he facts stated in it are t	rue (section 4	143.131(1) F	lorida Statu	tes).						
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Sign here					Phone				Fa	~				\dashv
	Signature of officer			Date	Preparer che	()	Preparer's		1 0	^ (<u>)</u> 		Н
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preparers	Firm's name (or yours if self-employed)			Date	FEIN									
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Emp	olover's Unemploy	ment Tax Annual Re	eport for Empl	overs of Domes	tic Empl	ovees O	nlv Pav	ment	Cou		JO NO	IDEIA		T-7
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Florida Departı	ment of Revenue	COMPLETE and MAIL wi	th your REPORT/PA	AYMENT.										
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	TICT-7							
	CALENDAR YEAR ENDING EN	MPLOYER'S NAME	J 🔼 /	COUNT NUMBER				
B EMPLOYETS COOLAL CECUDITY NUMBER								
9. EMPLOYEE'S SOCIAL SECURITY NUMBER 10. EMPLOYEE'S NAME (Please print first twelve characters of last name, first eight	11. EMPLOYEE'S GROSS WAGES PAID EACH QUARTER							
[10.] EMPLOYEE'S NAME (Please print first twelve characters of last name, first eight characters of first name and middle initial in boxes.)	THE ENTER OF THE OWN WASHINGTON WORKS THE COURT WORKS THE COURT OF THE							
SOCIAL SECURITY NUMBER SOCIAL SECURITY NUMBER	GROSS WAGES PAID EACH QUARTER							
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2								
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First Middle Name Initial								
10	TOTAL THIS PAGE FIRST QUARTER ENDING 3/31	TOTAL THIS PAGE SECOND QUARTER ENDING 6/30	TOTAL THIS PAGE THIRD QUARTER ENDING 9/30	TOTAL THIS PAGE FOURTH QUARTER ENDING 12/31				
12. TOTAL GROSS WAGES EACH QUARTER THIS PAGE INCLUDE IN LINE 2 ON PAGE 1								
				11 11 121 11 11 1 <u>2</u> 1 11 1				

Florida Department of Revenue Employer's Unemployment Tax Annual Report for Employers of Domestic Employees Only WAGES SCHEDULE OF DOMESTIC EMPLOYEES (additional page)

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