



QUARTERLY STATEMENT OF CONTRIBUTIONS WITHHELD AND PAID FORM

[1] The Quarter : Q__ / 200__	[2] Serial Number: [2] CQ
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[3] Employer's Registration Number :	<table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>										

[4] Employer's Name	[4]
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[5] Employer's Address . <small>(only if different from last form)</small>	[5]		Telephone	
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[6] Contact Person's Name	[6]		Telephone	
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[7] Put 'X' if <u>not</u> filing for the first time for this filing period:	<input type="checkbox"/> Correction
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[8] Gross wages for the quarter	[8]
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[9] Contributions withheld from Employees during the quarter.....	[9]
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[10] Contributions paid by the Employer on behalf of the Employees....	[10]
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[11] Total Contributions for the Quarter [11]=9+10.....	[11]
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[12] Information on monthly payments and all "Contribution Statement and Remittance" forms submitted during the quarter:

Filing Period (MM/YYYY)	Serial Number on the monthly Statement Form	Name of the Bank	Amount
Total amount of contributions actually paid in this quarter:			

The total amount actually paid and indicated in the above table must be equal to the total contributions amount reported in the item [11]

I declare that facts reported in this Statement are true. First Name/Last Name/Signature and Stamp (_____)

dd/mm/yy __/__/__

Instructions for Quarterly Statement of Contributions Withheld and Paid Form

- Box [1]** Put month for which the data on the statement pertains, ex. Q3/2002.
- Box [2]** Serial number of this statement is pre-printed; therefore don't write on box [2].
- Box [3]** Enter the withholder registration number, issued by Statistical Office of Kosovo, Tax Administration or NGO Liaison Office, i.e. **76464838 (8 digits)**; if the withholder is an individual the UNMIK Personal ID Number is to be entered in this box, i.e. **1445563478 (10 digits)**.
- Box [4]** Put the name of the employer, ex. Business Organization Ylli Peje
- Box [5]** Put the address of the employer, ex. Skenderbeu St., No. 22. Put the telephone number on the adjacent box.
- Box [6]** Put the name of the contact person, ex. Chief of Finance XY and also put the telephone number of this person on the adjacent box.
- Box [7]** Put "X" on the box if not filing for the first time for this quarter.
- Box [8]** Put the gross wages for the quarter, ex. 7500 € (based on wage of 250 € for each employee and total number of employee in 10 for 3 months).
- Box [9]** Put the contributions withheld from all employees for the quarter, ex. 375 € (250 € x 5 % x 10 employees x 3 month).
- Box [10]** Put the contributions paid by the employer on behalf of all the employees for the quarter, ex. 375 € (250 € x 5% x 10 employees x 3 month).
- Box [11]** Put the total amount of contributions remitted for the quarter, ex. 750€ (375 € employee contribution and 375 employer contribution).
- Box [12]** List the monthly pension contribution statements filed for the quarter.
- Column 1** – Put the filing of the monthly statement, ex. 09/2002
- Column 2** – Put the serial number of the monthly statement, ex. CM 100987
- Column 3** – Put the name of the bank where the statement was filed.
- Column 4** – Put the amount that was paid to the bank, ex. 125 €
- Total** – Add up the individual payments and put the sum on this box.

This statement should be signed and dated by the employer or person authorized by him/her. It should be submitted to the Regional Tax Administration office by the 15th of the month following the end of the quarter.