

**Sycamore Township Kenwood Southwest JEDZ
Allocation Form**

Name: _____ Social Security No. _____

Wage & Salary Allocation

1. Total Days in Year (365 or 366 in Leap Year unless you worked only part of year) 1. _____
Indicate the dates of part-year employment from _____ to _____

2. Non-Working Days
A Saturdays and Sundays not worked (104 days) A. _____

B. Holidays B. _____

C. Sick Leave Used C. _____

D. Vacation D. _____

E. Oher Non-working Days (Explain: _____)
_____ E. _____

F. Total Non- working Days(Total 2A – 2E) F. _____

3. Total Days Worked During the Year (Line 1 minus 2F) 3. _____

4. Total Days Worked Outside of SWJEDZ per Itinerary Form 4. _____

5. Days Worked Within SWJEDZ (Line 3 Minus Line 4) 5. _____

6. SWJEDZ Allocation Factor (Line 5 Divided by Line 3) 6. _____

Attach to your Southwest JEDZ Return