

Idaho Hire One Act Credit Supplemental Schedule

| | | |
|----------------------------|-------------------------------|-----------------|
| Name(s) as shown on return | Social Security Number or EIN | Tax year ending |
|----------------------------|-------------------------------|-----------------|

| A | B | C | D | E | F | G | H | I |
|-----------------|------------------------|------------|------------------------|----------------------|---|--|--|--|
| Employee's Name | Social Security Number | Date Hired | Date Employment Ceased | County of Employment | Health Care Benefit Coverage (Single 80% or Family 70%) | Gross Wages Paid to Employee During the Employee's Initial 12 Months of Employment | Gross Wages Reported on Form 72, Part III, line 1a | Gross Wages Reported on Form 72, Part III, line 1b |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |