

EMPLOYER'S QUARTERLY RETURN OF LICENSE FEE WITHHELD
CITY OF BEATTYVILLE, KY
ATTENTION: CITY CLERK

BPT .01

- 1 NUMBER OF TAXABLE EMPLOYEES _____
- 2 TOTAL SALARIES, WAGES, COMMISSIONS, AND OTHER _____
- 3 LESS NON TAXABLE ITEMS (COMPENSATIONS PAID
FOR SERVICES PAID OUTSIDE OF BEATTYVILLE) _____
- 4 LESS 401 (K) CONTRIBUTION EXEMPTED _____
- 5 ACTUAL TAX WITHHELD IN QUARTER AT 1% (.01) _____
- 6 PENALTY AT 10% OF LICENSE FEE _____
- 7 INTEREST ON PENALTIES 8% (PER ANNUM) _____
- 8 TOTAL (INCLUDING INTEREST AND PENALTY DUE) _____

(NAME AND ADDRESS OF EMPLOYER)

I hereby certify that the information and statements contained herein and any schedules or exhibits attached are true and correct.

SIGNED _____

(OFFICIAL TITLE) _____
 Owner, Partner, Member, President, Treasurer, Agent)

Date _____

THIS RETURN MUST BE FILED ON OR BEFORE DATE DUE AS SHOWN BELOW

MAKE CHECK OR MONEY ORDER PAYABLE TO
 CITY OF BEATTYVILLE, CITY CLERK
 FOR QUARTER ENDING

MONTH	DAY	YEAR

NOTIFY CITY CLERK OF BEATTYVILLE OF ANY CHANGES IN OWNERSHIP, NAME AND/OR ADDRESS IF RECEIPT IS DESIRED. RETURN EMPLOYER'S COPY OF THIS FORM AND ENCLOSE A SELF-ADDRESSED, STAMPED ENVELOPE

DUE ON OR BEFORE
 Mail to City of Beattyville
 P O Box 307, Beattyville KY 41311