

**ESTILL COUNTY TAX ADMINISTRATOR
EMPLOYER'S RETURN OF PAYROLL TAX WITHHELD**



1. Salaries, wages, commissions & other compensation paid all employees for services in This County	\$ _____
2. Tax Due at - 2.00 %	\$ _____
3. Adjustment for preceding quarters (past due balances / underpayments)	\$ _____
4. Penalty (per month) - 5.00% Minimum - \$25.00	\$ _____
5. Interest (per annum) - 12.00%	\$ _____
6. BALANCE DUE	\$ _____

7. Overpayment to be credited to next month \$ _____

I hereby certify that the information, schedules, statements and exhibits filed herewith are true and correct.

Signed _____

Official Title _____ Date _____

Account No.



Phone Number

FOR PERIOD ENDING		
Month	Day	Year
	31	
RETURN DUE ON OR BEFORE		
Month	Day	Year
	15	

FED ID No. 06-1655770

Make checks payable and mail to:

**ESTILL COUNTY
FISCAL COURT**

130 MAIN STREET ROOM
IRVINE KY 40336

(606) 723-7524

If no wages were paid this period, mark "NONE" and return this form

Form HCOC-Q3 Rev. 9/27/02

*INDICATE ANY NAME OR ADDRESS CHANGE ABOVE

*PLEASE MAKE A COPY OF THIS FORM FOR YOUR RECORDS