

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

11111111111111111111

FOR PERIOD ENDING

Month	Day	Year
07	31	2023

RETURN DUE ON OR BEFORE

Month	Day	Year
08	15	2023

FED ID No.

Make checks payable and mail to:

ESTILL COUNTY FISCAL COURT

130 MAIN STREET ROOM 101
IRVINE KY 40336

(606) 723-7524

Form HCOC-Q3 Rev. 9/27/02

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

*INDICATE ANY NAME OR ADDRESS CHANGE ABOVE

*PLEASE MAKE A COPY OF THIS FORM FOR YOUR RECORDS

ESTILL COUNTY TAX ADMINISTRATOR
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FOR PERIOD ENDING

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09	30	2023

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Month	Day	Year
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FOR PERIOD ENDING

Month	Day	Year
10	31	2023

RETURN DUE ON OR BEFORE

Month	Day	Year
11	15	2023

FED ID No.

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