ESTILL COUNTY TAX ADMINISTRATOR EMPLOYER'S RETURN OF PAYROLL TAX WITHHELD Salaries, wages, commissions & other compensation paid all employees for services in This County 7. Overpayment to be credited to next month 2. Tax Due at -2.00 % 3. Adjustment for preceding quarters (past due balances / I hereby certify that the information, schedules, statements and exhibits filed underpayments) herewith are true and correct. 4. Penalty (per month) - 5.00% Minimum - \$25.00 Signed _ 5. Interest (per annum) - 12.00% OfficialTitle 6. BALANCE DUE Date FOR PERIOD ENDING Make checks payable Account No. Month and mail to: Day Year 01 31 2024 **ESTILL COUNTY FISCAL COURT** RETURN DUE ON OR BEFORE 130 MAIN STREET ROOM 101 Month Day Year Phone Number IRVINE KY 40336 02 15 2024 (606) 723-7524 FED ID No. 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 EMPLOYER'S RETURN OF PAYROLL TAX WITHHELD Salaries, wages, commissions & other compensation \$ 7. Overpayment to be credited to next month paid all employees for services in This County Tax Due at -2 00 % Adjustment for preceding quarters (past due balances / I hereby certify that the information, schedules, statements and exhibits filed underpayments) herewith are true and correct. 4. Penalty (per month) - 5.00% Minimum - \$25.00 Signed 5 . Interest (per annum) - 12.00% Date _

OfficialTitle 6. BALANCE DUE FOR PERIOD ENDING Account No. Month Day Year 02 29 2024 RETURN DUE ON OR BEFORE Month Day Year Phone Number 03 15 2024 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 EMPLOYER'S RETURN OF PAYROLL TAX WITHHELD Salaries, wages, commissions & other compensation 7. Overpayment to be credited to next month paid all employees for services in This County 2.00 % Adjustment for preceding quarters (past due balances / I hereby certify that the information, schedules, statements and exhibits filed underpayments) herewith are true and correct. 4. Penalty (per month) - 5.00% Minimum - \$25.00 Signed _ 5. Interest (per annum) - 12.00% OfficialTitle 6. BALANCE DUE \$ Date FOR PERIOD ENDING Account No. Make checks payable Month and mail to: Day Year 03 31 2024 **ESTILL COUNTY FISCAL COURT** RETURN DUE ON OR BEFORE 130 MAIN STREET ROOM 101 Month Day Year Phone Number IRVINE KY 40336 04 15 2024 (606) 723-7524 FED ID No.

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

Form HCOC-Q3 Rev. 9/27/02

ESTILL COUNTY TAX ADMINISTRATOR EMPLOYER'S RETURN OF PAYROLL TAX WITHHELD Salaries, wages, commissions & other compensation 7. Overpayment to be credited to next month paid all employees for services in This County 2. Tax Due at -2.00 % Adjustment for preceding quarters (past due balances / I hereby certify that the information, schedules, statements and exhibits filed 3. underpayments) herewith are true and correct. 4. Penalty (per month) - 5.00% Minimum - \$25.00 5. Interest (per annum) - 12.00% OfficialTitle 6. BALANCE DUE Date FOR PERIOD ENDING Make checks payable Account No. and mail to: Month Day Year 04 2024 **ESTILL COUNTY FISCAL COURT** RETURN DUE ON OR BEFORE 130 MAIN STREET ROOM 101 Month Day Year Phone Number IRVINE KY 40336 05 15 2024 (606) 723-7524 FED ID No. 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 EMPLOYER'S RETURN OF PAYROLL TAX WITHHELD 1. Salaries, wages, commissions & other compensation 7. Overpayment to be credited to next month paid all employees for services in This County 2. Tax Due at -2.00 % 3. Adjustment for preceding quarters (past due balances / I hereby certify that the information, schedules, statements and exhibits filed underpayments) herewith are true and correct. 4. Penalty (per month) - 5.00% Minimum - \$25.00 Signed 5. Interest (per annum) - 12.00% OfficialTitle 6. BALANCE DUE Date _ FOR PERIOD ENDING Make checks payable Account No. Day and mail to: Month Year 05 2024 ESTILL COUNTY FISCAL COURT RETURN DUE ON OR BEFORE 130 MAIN STREET ROOM 101 Month Dav Year IRVINE KY 40336 Phone Number 06 15 2024 FED ID No. (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 EMPLOYER'S RETURN OF PAYROLL TAX WITHHELD 1. Salaries, wages, commissions & other compensation 7. Overpayment to be credited to next month paid all employees for services in This County 2. Tax Due at -2.00 % 3. Adjustment for preceding quarters (past due balances / I hereby certify that the information, schedules, statements and exhibits filed underpayments) herewith are true and correct. 4. Penalty (per month) - 5.00% Minimum - \$25.00 Signed 5. Interest (per annum) - 12.00% OfficialTitle 6. BALANCE DUE \$ Date FOR PERIOD ENDING Make checks payable Account No. and mail to: Month Day Year 06 2024 ESTILL COUNTY FISCAL COURT RETURN DUE ON OR BEFORE 130 MAIN STREET ROOM 101 Month Dav Year Phone Number IRVINE KY 40336 07 (606) 723-7524 FED ID No.

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

Form HCOC-Q3 Rev. 9/27/02