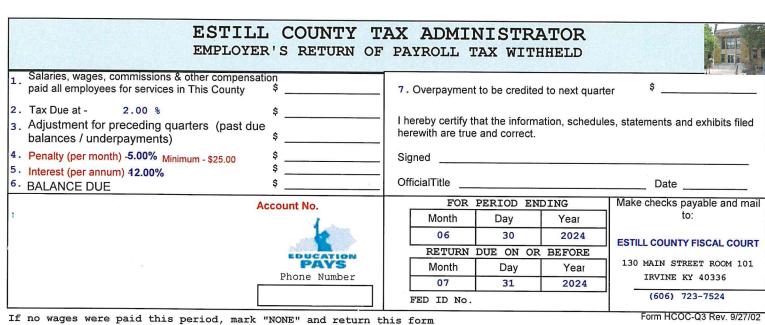
## ESTILL COUNTY TAX ADMINISTRATOR EMPLOYER'S RETURN OF PAYROLL TAX WITHHELD Salaries, wages, commissions & other compensation paid all employees for services in This County 7. Overpayment to be credited to next quarter 2. Tax Due at -2.00 % I hereby certify that the information, schedules, statements and exhibits filed 3. Adjustment for preceding quarters (past due herewith are true and correct. balances / underpayments) 4. Penalty (per month) -5.00% Minimum - \$25.00 Signed \_ 5. Interest (per annum) 42.00% OfficialTitle 6. BALANCE DUE Date FOR PERIOD ENDING Make checks payable and mail Account No. Month Year Day 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 30 2024 (606) 723-4074 (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



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EMPLOYER'S RETURN OF	AX ADMINISTRATOR PAYROLL TAX WITHHELD
Salaries, wages, commissions & other compensation paid all employees for services in This County	7 . Overpayment to be credited to next quarter \$
2. Tax Due at - 2.00 % \$  3. Adjustment for preceding quarters (past due balances / underpayments) \$	I hereby certify that the information, schedules, statements and exhibits filed herewith are true and correct.
4 - Penalty (per month) -5.00% Minimum - \$25.00 \$ 5 Interest (per annum) 42.00%	Signed
6. BALANCE DUE \$	OfficialTitle Date
Account No.	FOR PERIOD ENDING Make checks payable and mail
1	Month Day Year to:
	09 30 2024 ESTILL COUNTY FISCAL COURT
FINALATION	RETURN DUE ON OR BEFORE

Phone Number

Month

10

Day

31

FED ID No. If no wages were paid this period, mark "NONE" and return this form

Form HCOC-Q3 Rev. 9/27/02

130 MAIN STREET ROOM 101

IRVINE KY 40336

(606) 723-7524

\*INDICATE ANY NAME OR ADDRESS CHANGE ABOVE

Year

2024

EMPLOYER'S RETURN OF	AX ADMINISTRATOR PAYROLL TAX WITHHELD	THE RES	
Salaries, wages, commissions & other compensation paid all employees for services in This County	7 . Overpayment to be credited to next qua	arter \$	
2. Tax Due at - 2.00 % \$  3. Adjustment for preceding quarters (past due balances / underpayments) \$	I hereby certify that the information, schedules, statements and exhibits filed herewith are true and correct.		
4 . Penalty (per month) -5.00% Minimum - \$25.00 \$ \$ . Interest (per annum) 42.00% \$	SignedOfficialTitle	Date	
Account No.	FOR PERIOD ENDING	Make checks payable and mail	
	Month Day Year	to:	
	12 31 2024	ESTILL COUNTY FISCAL COURT	
EDUCATION	RETURN DUE ON OR BEFORE		
PAYS	Month Day Year	130 MAIN STREET ROOM 101	
Phone Number	01 31 2025	IRVINE KY 40336	
	FED ID No.	(606) 723-7524	
If no wages were paid this period mark "NONE" and return t	his form	Form HCOC-Q3 Rev. 9/27/02	

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