

EMPLOYER'S QUARTERLY RETURN OF LICENSE FEE WITHHELD

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| 1. Total earnings paid all employees in quarter. | \$ _____ |
| 2. Less earnings for work or services rendered outside Calvert City. | _____ |
| 3. Taxable earnings (Line 1 minus Line 2). | _____ |
| 4. Tax withheld in quarter at 1/2%. | \$ _____ |
| 5. Penalty (5% per month of Line 4 from due date until paid). | _____ |
| 6. Interest (1% of Line 4 for each month or fraction thereof past due, maximum 12%). | _____ |
| 7. Total (include penalty and interest if due). | \$ _____ |
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If no wages paid this quarter, indicate "**NONE**", sign and return form.

FOR QUARTER ENDING

Payment due within one month from above date. Make check or money order to City of Calvert City and mail to P.O. Box 36, Calvert City, KY 42029. Notify Tax Administrator of any changes in address or ownership of business.

Signature _____

Date _____