

EMPLOYEE/EMPLOYER QUARTERLY RETURN OF LICENSE FEE WITHHELD

- 1. Total earnings paid all employees (\*)
2. Less earnings for outside services rendered
3. Taxable earnings (Line 1 minus Line 2)
4. Actual tax withheld in quarter at 1.5%
5. Penalty (0.5 of Line 4)
6. Total (include penalty due)
Min. Penalty \$25.00 Int. Rater 12% per annum

\*If no wages were paid this quarter, mark "NONE", sign and return with explanation.

Remit To: City of Lewisburg FOR QUARTER ENDING: (Month If Paid Monthly)
P.O. Box-239
Lewisburg, KY 42256

Payment due within one month from the above date (If receipt desired, enclose self-addressed, stamped envelope.)

Acct. #

Name & Address:

Date:

Signature

Title-Owner, Partner, President, Etc.

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