

CITY OF JEFFERSONTOWN, KENTUCKY • P.O. BOX 991458 • JEFFERSONTOWN, KY $\,$ 40269-1458

Phone (502) 267-8333 • Fax (502) 267-0547 • www.jeffersontownky.com

Return MUST be Completed Regardless of Remittance

CITY WITHHOLDING TAX

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FOR PERIOD ENDING	DUE ON (OR BEFORE	Business Na	ime or D/B/A
			>	
CITY OCCUPATIONAL ACCOUNT NUMBER			Business Description	
			Buomoso Boompaon	
MEMO TO TAXPAYER			>	
STANDARD TA	X PAYMENT		Industry Type (See 1997 NAICS Table for Codes)	Federal I.D. Number
L-1 PERIOD: MAR 31 · JUN 30 · SEP 30 · DEC 31 / YEAR ▶ ▶ Circle quarter and enter year.			>	>
L-2 ENTER TOTAL NUMBER OF EMPLOYEES ► ► ► ► ►			Phone	Fax
L-3 ENTER TOTAL WAGES FOR PERIOD ► ► ► ► ► ► ► Total salaries, wages, commissions & other compensation paid.			•	>
L-4 TAX DUE FOR PERIOD* > > > > > > > > > > > > > > > > > > >			Website	
PAST DUE PENALTY & INTEREST (If Applicable)			Primary Contact (CEO or Officer)	
L-5 INTEREST		>		
L-6 PENALTY**: Line 4 x 10% fixed rate = PENALTY ► ► ► ► ► **½% per month due if payment is past due more than six months. Total not to exceed 25%.			E-mail	
			>	
L-7 TOTAL TAX DUE			Secondary Contact	
			>	
		Business Ownership Change (If Applicable)		
Signature		Date	Date of Change	Previous Owner
			>	>
Print Name		Title	Former Trade Name	
			>	