MCCREARY COUNTY TAX ADMINISTRATOR

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	ER'S RETURN OF se were paid this period			HELD s form	Linux.
Salaries, wages, commissions & other compensation paid all employees for services in This County	\$	7. Overpayment to		•	\$
2 • Tax Due at - 1.5%	\$	I hereby certify exhibits filed here			edules, statements and
Adjustment for preceding quarters (past due balances / underpayments)	\$		cwitii are tra	c una correc	,
4 • Penalty (per Month) - 5% 25% MAX, \$25 MIN		Signed			
All late fees calculated from (Including) Month due	\$	Oigrica			
5. Interest (per annum) - 12% or 1% per Month 6. BALANCE DUE	\$	OfficialTitle			Date
3	Account No.:	FOR	PERIOD EN	DING	Make checks payable and mail
	Account No	Month	Day	Year	to:
	Phone Number:				MCCREARY COUNTY TAX ADMINISTRATOR
		RETURN	DUE ON OR	BEFORE	PO BOX 327
	.ái -	Month	Day	Year	WHITLEY CITY KY 42653
					Phone: (606) 376-1322 Fax: (606) 376-4319
Indicate any name or address change about	ove. PAYS	FED ID No.			stephanie@mccrearycounty.cc
*PLEASE MAK	E A COPY OF THIS FORM	FOR YOUR RECO	RDS.		Form OCC-3PT Rev. 3/29/2017

EMPLOYE	R'S RETURN OF	AX ADMINISTRA LICENSE FEE WITH , mark "NONE" and return thi	HELD	
Salaries, wages, commissions & other compensation paid all employees for services in This County Tax Due at - 1.5% Adjustment for preceding quarters	\$ \$ \$	7. Overpayment to be credited to n I hereby certify that the inforexhibits filed herewith are true	mation, sche	
(past due balances / underpayments) 4. Penalty (per Month) - 5% 25% MAX, \$25 MIN All late fees calculated from (Including) Month due 5. Interest (per annum) - 12% or 1% per Month 6. BALANCE DUE	\$ \$	Signed		Date
o. Brannor bot	Account No.: Phone Number:	FOR PERIOD EN Month Day	Year	Make checks payable and mail to: MCCREARY COUNTY TAX ADMINISTRATOR
Indicate any name or address change abo	ve. EDUGATION	RETURN DUE ON OR Month Day FED ID No.	Year	PO BOX 327 WHITLEY CITY KY 42653 Phone: (606) 376-1322 Fax: (606) 376-4319 stephanie@mccrearycounty.cc

*PLEASE MAKE A COPY OF THIS FORM FOR YOUR RECORDS.

Form OCC-3PT Rev. 3/29/2017

EMPLOYE	R'S RETURN OF	AX ADMINISTRATOR LICENSE FEE WITHHELD mark "NONE" and return this form	
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 - 1.5%	\$	I hereby certify that the information, sch exhibits filed herewith are true and correc	
Adjustment for preceding quarters (past due balances / underpayments)	\$	CAMBIG HEAT HEAT WITH ALC IT AC AND CONTENT	, , , , , , , , , , , , , , , , , , ,
4. Penalty (per Month) - 5% 25% MAX, \$25 MIN		Signed	
All late fees calculated from (Including) Month due 5. Interest (per annum) - 12% or 1% per Month	\$		
6. BALANCE DUE	\$	OfficialTitle	Date
	Account No.:	FOR PERIOD ENDING	Make checks payable and mail
		Month Day Year	to:
	Phone Number:		MCCREARY COUNTY TAX ADMINISTRATOR
		RETURN DUE ON OR BEFORE	PO BOX 327
	wii .	Month Day Year	WHITLEY CITY KY 42653
			Phone: (606) 376-1322 Fax: (606) 376-4319
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