

# WOODFORD COUNTY TAX ADMINISTRATOR EMPLOYER'S RETURN OF LICENSE FEE WITHHELD

If no wages were paid this period, mark "NONE" and return this form

1. Salaries, wages, commissions & other compensation paid all employees for services in Woodford County \$ \_\_\_\_\_
2. Tax Due at - 1.50% \$ \_\_\_\_\_
3. Adjustment for preceding quarters (past due balances / underpayments) Explain on back of form. \$ \_\_\_\_\_
4. Penalty(per month) 5.00% Min \$25; Max 25% \$ \_\_\_\_\_
5. Interest (per annum) - 12.00% \$ \_\_\_\_\_
6. BALANCE DUE \$ \_\_\_\_\_

7. Overpayment to be credited to next quarter \$ \_\_\_\_\_

I hereby certify that the information, schedules, statements and exhibits filed herewith are true and correct.

Signed \_\_\_\_\_

Official Title \_\_\_\_\_ Date \_\_\_\_\_

Account No.



Indicate any name or address change above.

**FOR PERIOD ENDING**

Month	Day	Year

**RETURN DUE ON OR BEFORE**

Month	Day	Year

FED ID No.

Make checks payable and mail to:

**WOODFORD COUNTY TAX ADMINISTRATOR**  
103 SOUTH MAIN ST ROOM 201  
VERSAILLES KY 40383

Phone: (859) 873-5701  
Fax: (859) 873-0196

PLEASE MAKE A COPY OF THIS FORM FOR YOUR RECORDS

Form OCC-WH 7/11/2008