

BOYLE COUNTY AND CITY OF DANVILLE, KENTUCKY EMPLOYERS QUARTERLY WITHHOLDING RETURN

QUARTER ENDING:

DUE DATE:

PRINT EMPLOYER'S FEDERAL TAX IDENTIFICATION NUMBER:

Check if new address and make corrections ACCOUNT ID# _____

I had no employee earnings this quarter. Check box, sign form and return to address below.

FINAL RETURN (CHECK ONLY TO CLOSE ACCOUNT)
LAST DATE EMPLOYEES PAID: _____
I will have no employees in the future. Check box, sign form and return with any attachments to address below.



COLUMN 1 COUNTY AND CITY	COLUMN 2 TOTAL EARNINGS	COLUMN 3 EXCLUDED EARNINGS	COLUMN 4 SUBJECT EARNINGS	COLUMN 5 WITHHOLDING RATE	COLUMN 6 FEE DUE
BOYLE COUNTY				.0075	
(Taxpayer MUST file BOTH County AND applicable City)			TOTAL FEE DUE		
			PENALTY <small>5% per month or portion thereof not to exceed 25%. \$25.00 minimum penalty.</small>		
			INTEREST <small>FEE DUE X 12% Per Annum Simple Interest</small>		
			SUB-TOTAL AMOUNT DUE		



COLUMN 1 CITY	COLUMN 2 TOTAL EARNINGS	COLUMN 3 EXCLUDED EARNINGS	COLUMN 4 SUBJECT EARNINGS	COLUMN 5 WITHHOLDING RATE	COLUMN 6 FEE DUE
CITY OF DANVILLE				.0125	
I DECLARE UNDER PENALTY OF PERJURY THAT I HAVE EXAMINED THIS RETURN AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS A TRUE, CORRECT AND COMPLETE RETURN. RETURN MUST BE SIGNED.			TOTAL FEE DUE		
			PENALTY <small>5% per month or portion thereof not to exceed 25%. \$25.00 minimum penalty.</small>		
			INTEREST <small>FEE DUE X 12% Per Annum Simple Interest</small>		
			SUB-TOTAL AMOUNT DUE		
TOTAL AMOUNT DUE <small>Add Boyle County and City of Danville Subtotals</small>					

SIGNATURE _____ DATE _____

PRINTED NAME/TITLE _____ PHONE NO. _____

**ENCLOSE CHECK OR MONEY ORDER PAYABLE TO
"BOYLE COUNTY TAX ADMINISTRATOR"**

Make payment and mail to:

TAX ADMINISTRATORS OFFICE
321 WEST MAIN ST., ROOM 117
BOYLE COUNTY COURT HOUSE
DANVILLE, KENTUCKY 40422-1848
PHONE (859) 238-1115

TAXPAYER: PLEASE MAKE A COPY FOR YOUR RECORDS AND RETURN ORIGINAL