CITY OF HANSON KENTUCKY   **Payroll Tax Return**

1. Total Number of Employees _____ Taxable Employees _____   Make Check Payable & Mail to:

2. Total Salaries, Wages, Commissions and other Compensation   _____.___   City Clerk, City of Hanson

3. Less Compensation Paid for Services Outside of Hanson   _____.___   P.O. Box 337

4. Taxable Earnings (Line 2 Minus Line 3)   _____.___   Hanson, KY 42413

5. Actual Tax Due in Period at 1.5%   _____.___   I do hereby certify that the information

6. Adjustments from Prior Periods   _____.___   and statements contained herein and

7. Interest (1% Per Month) After Due Date   _____.___   any schedules or exhibits attached

8. Penalty (5% Per Month up to 25%, $25 Min.) After Due Date   _____.___   are true and correct.

9. Total Taxes Due Including Interest & Penalty   _____.___   _____

*If no wages were paid this period, mark "NONE" and return this form with explanati   Signed   Date

Date Received   _____

Check Number   _____

Check Amount   _____

Account Number   _____

For Period Ending   _____

Due on or Before   _____

Notice: This form must be returned whether or not you had employees during this period.