

CITY OF BEREA

RETURN OF LICENSE FEES WITHHELD

MAKE CHECK PAYABLE TO AND MAIL TO:
 CITY OF BEREA, FINANCE DEPARTMENT
 212 CHESTNUT STREET
 BEREA, KY. 40403 • (859) 986-7218

FOR PERIOD ENDING			DUE ON OR BEFORE		
MONTH	DAY	YEAR	MONTH	DAY	YEAR

MAIL TO:

**PLEASE RETURN THE WHITE COPY
AND RETAIN THE PINK DUPLICATE**

1 NUMBER OF EMPLOYEES	
2 SALARIES, WAGES, COMMISSION + OTHER COMPENSATION PAID ALL EMPLOYEES	\$
3 LESS NON-TAXABLE ITEMS	\$
4 TAXABLE EARNINGS (Line 2 Minus Line 3)	\$
5 TOTAL TAX (Line 4 x .020)	\$
6 PENALTY 10%	\$
7 INTEREST .015 PER MONTH	\$
8 TOTAL DUE (Line 5 + Line 6 + Line 7)	\$

I HEREBY CERTIFY THAT THE INFORMATION AND STATEMENTS CONTAINED HEREIN AND ANY SCHEDULES OR EXHIBITS ATTACHED ARE TRUE AND CORRECT.

DATE _____

OFFICIAL TITLE _____

SIGNED _____