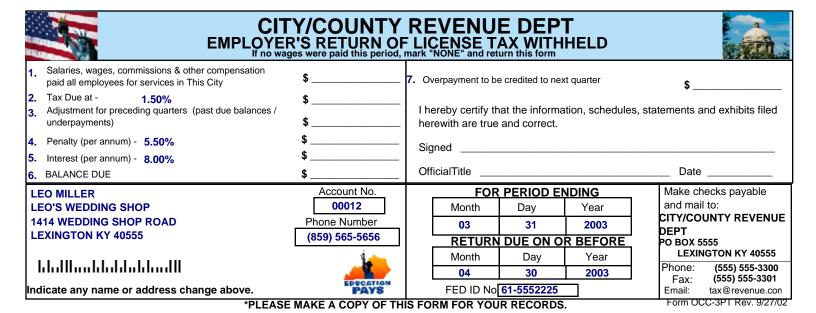
CITY/COUNTY REVENUE DEPT EMPLOYER'S RETURN OF LICENSE TAX WITHHELD If no wages were paid this period, mark "NONE" and return this form Salaries, wages, commissions & other compensation \$_ 7. Overpayment to be credited to next quarter paid all employees for services in This City Tax Due at -1.50% I hereby certify that the information, schedules, statements and exhibits filed Adjustment for preceding quarters (past due balances / herewith are true and correct. underpayments) Penalty (per annum) - 5.50% Signed _ 5. Interest (per annum) - 8.00% OfficialTitle _ Date __ BALANCE DUE Make checks payable Account No. FOR PERIOD ENDING **JAN DOE** and mail to: 00011 **JAN'S JEWELLS** Month Day Year CITY/COUNTY REVENUE Phone Number 1234 DIAMOND PLACE 2003 03 31 DEPT **LEXINGTON KY 40500-0005** (859) 859-8598 RETURN DUE ON OR BEFORE PO BOX 5555 **LEXINGTON KY 40555** Day Month Year (555) 555-3300 2003 (555) 555-3301 FED ID No 61-9876543 Indicate any name or address change above. tax@revenue.con Fmail: Form OCC-3PT Rev. 9/27/02 *PLEASE MAKE A COPY OF THIS FORM FOR YOUR RECORDS.



CITY/COUNTY REVENUE DEPT EMPLOYER'S RETURN OF LICENSE TAX WITHHELD If no wages were paid this period, mark "NONE" and return this form Salaries, wages, commissions & other compensation 7. Overpayment to be credited to next quarter paid all employees for services in This City Tax Due at -1.50% I hereby certify that the information, schedules, statements and exhibits filed Adjustment for preceding quarters (past due balances / underpayments) herewith are true and correct. Penalty (per annum) - 5.50% Signed _ 5. Interest (per annum) - 8.00% OfficialTitle Date BALANCE DUE 6. Account No. FOR PERIOD ENDING Make checks payable **MARK DAVIDS** 00015

MARK DAVIDS
FISH HUT
4748 MAIN STREET
LEXINGTON KY 40588

Indicate any name or address change above.

(555) 555-5858

Phone Number

 FOR PERIOD ENDING

 Month
 Day
 Year

 03
 31
 2003

 RETURN DUE ON OR BEFORE

 Month
 Day
 Year

 04
 30
 2003

FED ID No 62-9995555

and mail to:
CITY/COUNTY REVENUE
DEPT
PO BOX 5555
LEXINGTON KY 40555

Phone: (555) 555-3300 Fax: (555) 555-3301 Email: tax@revenue.con