

Reconciliation of Harrodsburg License Fee Withheld

During Year Ended 20_____

**To Be Filed With The 4th Quarter's Return By January 31 - or With The FINAL
Quarterly Return Of The Closing Of Any Business Either By Sale Or Dissolution**

**TYPE OR PRINT IN THIS SPACE EMPLOYER'S NAME
AND ADDRESS OF PRINCIPAL PLACE OF BUSINESS.**

1. Total number employees as listed hereon _____

2. Total Harrodsburg License Fee withheld

Quarter ended Mar. 31, _____

Quarter ended June 30, _____

Quarter ended Sept. 30, _____

Quarter ended Dec. 31, _____

Total remitted for year _____

Soc. Sec. No.	NAME OF EMPLOYEE	Gross Wages Paid	Occupational License Withheld
IF OTHER PAGES USED TOTAL THIS PAGE _____			
If report is completed on this page total here _____		\$	\$