

**JESSAMINE COUNTY OCCUPATIONAL TAX
EMPLOYERS' RETURN OF LICENSE FEE WITHHELD**

FORM JCOT 1

IF NO WAGES WERE PAID THIS PERIOD, MARK "NONE", SIGN AND RETURN THIS FORM

- 1. Total salaries, wages, commissions and other compensation paid to all employees for services within Jessamine County 1 _____
- 2. Tax due this period at 1% (Line 1 x 1%) 2 _____
- 3. Adjustment for preceding quarters Credit/Balance Due 3 _____
- 4. Penalty for late filing/payment 5% per month not to exceed 25% \$25.00 minimum 4 _____
- 5. Interest 12 % per annum 5 _____

- 6. Balance Due 6 _____
- 7. Overpayment credited to next quarter 7 _____

I hereby certify that the information, schedules, statements and exhibits filed herewith are true and correct.

Signed _____ Date _____

Title _____ Ph. No. _____

Licensee : Indicate any changes/corrections below

Federal I.d. _____

Account No. _____

For Office Use Only
Received

Check No.

Amount

Make Checks Payable to:
Jessamine County Fiscal Court

Mail To:
Occupational Tax Office
105 Court Row, Nicholasville, KY 40356
Ph. (859) 885-3206
Fax (859) 887-0900

For Period End Date:

**Filing quarterly: Due dates are April 30, July 31,
October 31 and January 31**
Filing Annually: Due Date is February 28

**JESSAMINE COUNTY OCCUPATIONAL TAX
EMPLOYERS' RETURN OF LICENSE FEE WITHHELD**

FORM JCOT 1

IF NO WAGES WERE PAID THIS PERIOD, MARK "NONE", SIGN AND RETURN THIS FORM

- 1. Total salaries, wages, commissions and other compensation paid to all employees for services within Jessamine County 1 _____
- 2. Tax due this period at 1% (Line 1 x 1%) 2 _____
- 3. Adjustment for preceding quarters Credit/Balance Due 3 _____
- 4. Penalty for late filing/payment 5% per month not to exceed 25% \$25.00 minimum 4 _____
- 5. Interest 12 % per annum 5 _____

- 6. Balance Due 6 _____
- 7. Overpayment credited to next quarter 7 _____

I hereby certify that the information, schedules, statements and exhibits filed herewith are true and correct.

Signed _____ Date _____

Title _____ Ph. No. _____

Licensee : Indicate any changes/corrections below

Federal I.d. _____

Account No. _____

For Office Use Only
Received

Check No.

Amount

Make Checks Payable to:
Jessamine County Fiscal Court

Mail To:
Occupational Tax Office
105 Court Row, Nicholasville, KY 40356
Ph. (859) 885-3206
Fax (859) 887-0900

For Period End Date:

**Filing quarterly: Due dates are April 30, July 31,
October 31 and January 31**
Filing Annually: Due Date is February 28