

**CITY OF WARSAW ORDINANCE  
303 EAST MAIN STREET  
P.O. BOX 785  
WARSAW, KENTUCKY 41095-0785  
859-567-5900 Phone  
859-567-5931 Fax only**

**EMPLOYERS' QUARTERLY RETURN OF LICENSE FEE WITHHELD**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_

**PHONE:** \_\_\_\_\_

- |                                    |       |
|------------------------------------|-------|
| 1) EARNINGS OF ALL EMPLOYEES       | _____ |
| 2) EARNINGS OUTSIDE WARSAW         | _____ |
| 3) EARNINGS SUBJECT TO LICENSE FEE | _____ |
| 4) ACTUAL FEE AT 1.75%             | _____ |
| 5) PENALTY                         | _____ |
| 6) INTEREST                        | _____ |
| 7) TOTAL                           | _____ |
| 8) TOTAL NUMBER OF EMPLOYEES       | _____ |

FOR QUARTER ENDING (CIRCLE ONE)                      3/31      6/30      9/30      12/31

FOR CALENDAR YEAR \_\_\_\_\_

**DUE 30 DAYS AFTER END OF QUARTER**

SIGNED \_\_\_\_\_ TITLE \_\_\_\_\_

I declare under penalties of perjury, that this return has been examined by me to the best of my knowledge and belief is a true, correct, and complete return.

**PAYROLL WITHHOLDING TAX**

Employees working in the City of Warsaw are to be taxed at a rate of 1.75% of their gross salary or compensation.