LOGAN COUNTY OCCUPATIONAL TAX

EMPLOYER'S/SELF EMPLOYEE RETURN OCCUPATIONAL TAX WITHHELD

1. Total salaries, wages, commissions & other compensation paid $___________ Account No.
2. Less compensation paid for Services outside Logan Co. $___________
3. Taxable Earnings (line 1 minus line 2) $___________
5. Actual Tax Due at 0.75% $___________
6. Penalties- 5% per month/part of a month -$25.00 minimum $___________
7. Interest- 1% per month/part of a month $___________
8. BALANCE DUE: $___________

CIRCLE ONE MONTHLY, QUARTERLY OR YEARLY RETURN

RETURN DUE ON OR BEFORE

RETURN DUE ON OR BEFORE

FOR PERIOD ENDING

FOR PERIOD ENDING

Month Day Year
Phone: 2707263530

Month Day Year
Phone: 2707263530

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

Signed _______________

Official Title _______________

Date _______________

MUST BE POST-MARKED BY DUE DATE TO AVOID PENALTY AND INTEREST

Indicate any name or address change above.

LOGAN COUNTY OCCUPATIONAL TAX

EMPLOYER'S/SELF EMPLOYEE RETURN OCCUPATIONAL TAX WITHHELD

If no wages were paid this period, mark "NONE" and return this form by the due date to avoid $25.00 PENALTY

LOGAN COUNTY OCCUPATIONAL TAX

EMPLOYER'S/SELF EMPLOYEE RETURN OCCUPATIONAL TAX WITHHELD

If no wages were paid this period, mark "NONE" and return this form by the due date to avoid $25.00 PENALTY

LOGAN COUNTY OCCUPATIONAL TAX

EMPLOYER'S/SELF EMPLOYEE RETURN OCCUPATIONAL TAX WITHHELD

If no wages were paid this period, mark "NONE" and return this form by the due date to avoid $25.00 PENALTY

MUST BE POST-MARKED BY DUE DATE TO AVOID PENALTY AND INTEREST

Indicate any name or address change above.