FORM OLF-6 City of Paris 525 High Street Paris, KY 40361

PARISINDIVIDUAL LICENSE TAX RETURN

| is, KY 40361 | for taxable period beginni | ng | | , and ending |
|--------------|----------------------------|--------|------------|------------------------|
| (N) | AME, PLEASE PRINT) | | OCCUPATION | SOCIAL SECURITY NUMBER |
| (NUMBER & S | STREET) | (CITY) | (COUNT | TY) (STATE) |

1. Enter all wages, salaries, bonuses, commissions, and other compensation earned for work done or services performed.

| EMPLOYER'S NAME & NO. WHERE EMPLOYED | GROSS INCOME | | PARIS INCOME | | PARIS TAX | WITHHELD |
|---|------------------------|-------|--------------|---------|-----------|----------|
| | \$ | | \$ | | \$ | |
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| | | | | | | |
| | | | | | | |
| 2. ENTER TOTALS HERE | \$ | | \$ | | \$ | |
| 3. Enter Total Paris income (line 2) | | | | | \$ | |
| 4. Enter one and one-half (1 ¹ / ₂ %) of line 3 | | •••• | | | | |
| S. Enter Total Paris Occupational Tax Withheld as shown | in line 2 above | | | | | |
| 6. If line 4 is greater than line 5 difference as AUDITIO | NAL TAX DUE | | | | | |
| 7. Penalty for late filing 10% | | | | • • • • | | |
| 8. Interest of 1% per month | | | | • _ | | |
| 9. Total amount of tax due to be paid in full with this re | turn (mid lines 6, 7 & | 8). | | | | |
| 10. If line 5 is greater than line 4 enter difference to be 1 | REFUNUED | ••••• | | | | |

I declare under the penalties that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge anti belief is a true, correct, and complete return.

(SIGNATURE OF EMPLOYER)'

SIGNATURE OF TAXPAYER

*This return must be signed by your employer.