

City of Paintsville
P.O. Box 1588
Paintsville, KY 41240



Monthly Return Restaurant Tax

Month Ending
(Fill in the blank)

Location (if other than mailing address)

1. File return even though no tax is due.
2. Return is due 30 days following the end of the month for which report is made.
3. Report changes of ownership or address immediately.
4. Prepare this return and make and retain copy.

10% penalty, plus 12% interest against the total amount of tax overdue at any time. After sixty (60) days, the amount of penalty shall be compounded each month.

1. Gross Receipts	\$ _____
2. Tax - 3% of line 1	\$ _____
3. Penalty and/or Interest	\$ _____
4. Total Payment Due	\$ _____

I hereby certify that the statements made herein and any supporting schedules are true, correct and complete to the best of my knowledge.

Return Must be Signed

Date: _____

Signature of Individual Preparing Return

Official Title: Owner, Manager, ect .

Make Checks Payable to: CITY OF PAINTSVILLE

Mail Check and Copy to: P.O. Box 1588 Paintsville, KY 41240