

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



Motel Tax

Month Of
(Fill in the blank)

A. Total receipts from room charges	\$ _____
B. Total City Tax of 3%	\$ _____
C. Compensation	\$ _____
D. Tax Due	\$ _____
E. Penalty & Interest	\$ _____
F. Total Amount Due (Line D plus E)	\$ _____

Make Checks Payable To: MOTEL TAX
CITY OF PAINTSVILLE
P.O. Box 1588
Paintsville, KY 41240