Form RSO-1

LICENSE DEPARTMENT CITY OF RUSSELL SPRINGS P.O. BOX 247

RUSSELL SPRINGS, KY 42642

EMPLOYER'S QUARTERLY RETURN OF LICENSE FEE WITHHELD

Under City of Russell Springs Ordinance Dated February 2000.

I DECLARE, UNDER THE PENALTIES OF PERJURY, THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT, AND COMPLETE RETURN.

SIGNATURE

TITLE

DATE

Name and Address (Please fill out completely)

CHECK PAYABLE TO: CITY OF RUSSELL SPRINGS

2	Earnings For Services	
_	Outside Russell Springs	
3	Earnings Subject to License Fee	
4	Actual Fee Withheld at 1%	
5	Penalty 1/2% per month	
6	Interest (.83% of line 4 per month or fraction thereof)	
	1st Quarter -	3rd Quarter -
	2nd Quarter -	4th Quarter -