

TAYLOR COUNTY GOVERNMENT
DIVISION OF OCCUPATIONAL TAX COLLECTION
203 N Court Street, Suite 10
Campbellsville KY 42718
(270) 465-9760

EMPLOYEE REFUND CLAIM - 65 EXEMPT

EMPLOYEE

EMPLOYER

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SOC. SEC. #: \_\_\_\_\_

\_\_\_\_\_

DATE OF BIRTH: MM/DD/YY

FEDERAL I.D.#: \_\_\_\_\_

Table with 2 columns: Description and Amount. Rows include Total Gross Wages, Natural Persons 65 or Older, Adjusted Gross Wage, TOTAL OCCUPATIONAL TAX DUE, Total Occupational Tax WITHHELD, and Amount to Be REFUNDED.

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

Employee's Signature

Date

Employer's Signature

Date