## DIVISION OF OCCUPATIONAL TAX COLLECTION

203 N Court Street, Suite 10 Campbellsville KY 42718 (270) 465-9760

## **NET PROFIT REFUND**

TAXPAYER INFO. (Please Print)

| NAME:   | MAILING              |
|---|----------------------|
| ADDRESS:  | ADDRESS:             |
| SOC. SEC. #:  |                      |
| FEDERAL I.D.#:  |                      |
| 1. Total Net Profit in 20(Attach schedule)  | \$                   |
| 2. Taxable Amount (line 1 x 1%)   | \$                   |
| 3. Estimated Payments/Amount Overpaid   | \$                   |
| 4. Adjusted Net Profit (line 3 less line 2)   | \$                   |
| 5. Amount to Be REFUNDED  | \$                   |
| 6. Specify City of Campbellsville   | or Taylor County, KY |
| Check one. To apply for a refund from each separat  |                      |
| I hereby certify that the statements made her correct and complete to the best of my knowledge. |                      |
| Taxpayer's Signature  | Date                 |
| Tax Preparer  | Date Prepared        |